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ABSTRACT

"Zero to Three" is a single focus bulletin of the National Center for Infants, Toddlers, and Families providing insight from multiple disciplines on the development of infants, toddlers, and their families. Noting the greater variety of families children are entering or in which children are growing up, this issue focuses on looking beyond family forms and circumstances to focus on the child's experience, the quality of the child's important relationship, and the support for healthy development that these provide. The articles draw on extensive reviews of research literature, longitudinal ethnographic research, intervention studies, clinical practice, and careful observation to explore many varieties of "responsible commitment" that parents make to children in the earliest years and to each other. The featured articles are as follows: (1) "For Better or for Worse: An Ecological Perspective on Parents' Relationships and Parent-Infant Interaction" (Amy Susman-Stillman, Karen Appleyard, and Jessica Seibenbruner); (2) "Marriage: A Luxury Good?" (Frank F. Furstenberg); (3) "Very Young Children in Lesbian- and Gay-Headed Families: Moving beyond Acceptance" (Virginia Casper); (4) "Kinscription: Mothers Keeping Fathers Connected to Children" (Kevin Roy and Linda Burton); (5) "The Caregiving System in Separated and Divorcing Parents" (Judith Solomon); and (6) "Parenting Together after Divorce: Navigating the Winds of Change" (Bernadette Marie Bullock and Marion S. Forgatch). Also included is a report on improving psychosocial preparedness for young children and families in the context of terrorism concerns (Howard J. Osofsky and Joy D. Osofsky). Regular departments in the bulletin list Zero to Three publications, videotapes and on-line resources, and Zero to Three staff announcements. (HTH)

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ZERO TO THREE

January 2003
Volume 23 No. 3

Journal of ZERO TO THREE: National Center for Infants, Toddlers, and Families

The Impact of Adult Relationships on Early Development

Parental Relationships That Support Healthy Development

How Mothers Keep Fathers Connected to Children

Very Young Children in Lesbian- and Gay-Headed Families

Co-Parenting Through Separation, Divorce, and Remarriage

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Editor's Note

Young children – in the United States and around the world – are growing up in a greater variety of families than ever before. Babies enter families through birth, adoption, or fostering; they are conceived through intercourse or assisted reproductive technology; they live in families formed by marriage and remarriage, in cohabiting heterosexual families, in lesbian- and gay-headed families, and in single-parent families. In the midst of these demographic trends, a number of authors and policymakers have concluded that the research literature clearly supports a two-parent, heterosexual married family as the most appropriate family configuration for raising children. Other authors, however, suggest that it is time to look beyond family *structure* in order to identify – and support – those parental and family *strengths* that are most relevant for the successful nurturing and development of infants and toddlers.

When a colleague or student was having unusual difficulty evaluating whether a particular living arrangement was safe and sufficiently nurturing for a very young child, ZERO TO THREE founder Selma Fraiberg would ask, "What does the baby think?" In other words, she would encourage the infant/family practitioner to look beyond family forms and circumstances to focus on the child's experience, the quality of the child's important relationships, and the support for healthy development that these provided.

The contributors to this issue of *Zero to Three* do this, and more. Drawing on extensive reviews of the research literature, longitudinal ethnographic research, intervention studies, clinical practice, and careful observation, the authors explore many varieties of "responsible commitment" that parents make to their children in the earliest years, and to each other. They go on to suggest ways in which the infant/family field, our communities, and our country can strengthen marriages, unions of all types, and family life overall.

As always, we encourage readers to continue the dialogue begun by the contributors to this issue through letters to the editor, which will be published in forthcoming issues of *Zero to Three*.

Emily Fenichel

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CONTENTS

January 2003
Volume 23 No. 3

Features

For Better or for Worse: An Ecological Perspective on Parents' Relationships and Parent–Infant Interaction — *Amy Susman-Stillman, Karen Appleyard, and Jessica Siebenbruner* 4

Marriage: A Luxury Good? — *Frank F. Furstenberg* 13

Very Young Children in Lesbian- and Gay-Headed Families: Moving Beyond Acceptance — *Virginia Casper* 18

Kinscription: Mothers Keeping Fathers Connected to Children — *Kevin Roy and Linda Burton* 27

Caregiving Systems for Separated and Divorcing Parents — *Judith Solomon* 33

Parenting Together After Divorce: Navigating the Winds of Change — *Bernadette Marie Bullock and Marion Forgatch* 38

PAGE 4

PAGE 18

PAGE 33

Departments

Work in Progress
Terrorism: Improving Psychosocial Preparedness for Young Children and Families — *Howard J. Osofsky and Joy D. Osofsky* 44

Publications 50

On-Line Resources 53

Training Opportunities 54

Video 54

The Sally Provence Award 55

Cover photography: Marilyn Nolt

For Better or for Worse:

An Ecological Perspective on Parents' Relationships and Parent-Infant Interaction

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Photo: Marilyn Nolt

An increasing number of Americans are concerned about families like Crystal's.

Crystal is a 17-year-old single mother who lives with her mother and her siblings. She dropped out of high school after having her baby, and is currently supporting herself and her child through welfare payments. Crystal's model for parenting from her own mother is painful and problematic—poor parenting skills, little nurturing, excessive alcohol use, and abusive relationships with men who sometimes sexually molested Crystal. Crystal wants to "make things right" with her own child, and wants to do better for her child than her parents did in her own childhood. She wants to set up her own home, but doesn't know how to go about finding a job or finishing school, along with the responsibilities of child care. She wants her child to have a father figure and would like a partner, but her baby's father shows no interest in helping her, and she sees no decent prospects for partners in her small community.

The growing concern about families like Crystal's is warranted — statistics clearly show that very young children living with a single mother are more likely to grow up in poverty than very young children living in a two-parent family, and very young children are the most vulnerable to the negative effects of poverty (Brooks-Gunn & Duncan, 1997).

As a result, there is a growing political movement to promote married, two-parent families for the purposes of childrearing (Horn, 2000). While a number of authors conclude that the literature clearly supports a two-parent, married family as the most appropriate family configuration for raising children (Horn, 2002; Moore & Jelinek, 2002; Ooms, 2001), demographic trends show that children are growing up in a greater variety of families than ever before (e.g., single-parent families, cohabiting families, gay and lesbian families; Cherlin, 2001).

A critical issue for families with infants and toddlers is how the family is able to meet successfully the unique needs of infants and toddlers, which are social and emotional as well as physical and economic. Across all kinds of families, the infant's developmental need for a secure parent-infant relationship remains primary. And in our current high-pressure world, it also remains true that a parent's ability to focus on the parent–infant relationship is affected by many factors outside the immediate parent–infant world, including the quality of parents' own relationships (Bronfenbrenner & Morris, 1998; Susman-Stillman & Erickson, 2001).

In general, parents who are able to nurture their infants and toddlers successfully garner interpersonal and instrumental support from others and use personal insights and strengths within the context of their relationships. To be sure, the "ecology" surrounding parents and infants is filled with factors (sometimes called ecological factors), such as past experiences, the availability of supportive relationships, and access to economic resources, that guide and influence the formation of families and the development of healthy relationships. For example, the relationships adults have with other adults — particularly relationships between the baby's parents or other close relatives or supporters — are an important aspect of the ecology that affects parents' ability to build positive, secure relationships with their babies.

In light of a social policy proposal promoting a particular type of adult relationship that will likely target young, at-risk parents with infants and toddlers, it is timely to explore the marital and parental relationships that underlie supportive parent–infant interactions and some of the ecological factors that affect those relationships. In this article, we explore ecological factors (attitudes, personal experiences, social support, and economic resources) that affect family formation and adult relationships that support healthy infant and toddler development. We begin to explore the ways in which current research intersects with current policy, and point out gaps in current knowledge that limit our ability to design effective policies and programs. Additionally, we ponder the implications of the current state of research for professionals working with families with very young children.

at a glance

- The relationships that parents have with other adults affect their ability to build positive, secure relationships with their babies.
- Factors that shape adult attitudes toward family formation include: current experience, childhood experience, and economic opportunity.
- Harmony or discord in a marriage affects parent-child relationships.
- Many differences in young children's socioemotional development can be explained by socioeconomic status rather than family structure.

Ecological Factors That Shape Adult Attitudes Toward Family Formation

Because families are created not from blank slates but from a confluence of personal and ecological factors, an important question, when considering a social policy supporting marriage, is: How do families form? Current research indicates that a number of factors, including current individual experiences and attitudes, childhood family and attachment experience, and economic opportunity, impacts the development of marital and family relationships. How these same factors in turn affect parent–infant relationships is a less-studied, but equally important, matter.

The impact of current experience and attitudes

The interesting demographic observation about marriage rates in the United States is not so much that American women are not marrying, but that they are delaying marriage (Bumpass & Sweet, 2001), and they may cohabit prior to marriage. Marriage remains a strong institution, and women are quite thoughtful and deliberate about how and when they decide to enter into marriage. Interviews with a large sample of unmarried single mothers receiving welfare and residing in urban areas (Edin, 2000) and with a smaller sample of single and married mothers living in rural areas (Fitchen, 1995) show that these women respect marriage. The urban mothers want to marry once their partner can demonstrate an ability to contribute economically (they expect marriage to "pull them up the class ladder"), and when parenting tasks associated with early childhood are completed and they are able to focus their own attentions on employment. Under these conditions, these women say, they can both contribute to their own economic independence and have greater power in the marital relationship.

Personal social attitudes and life goals also shaped these mothers' attitudes about marriage. They want to ensure that marriage helps them gain respectability in their community, as they work to maintain control over their households, balance trust and mistrust of men (based on their own history with men), and manage their fear of domestic violence. African American mothers were more concerned with economic issues, respectability, and control, while Caucasian mothers were more concerned with trust and domestic violence.

These attitudes toward family formation bring a particular family to mind:

> *Cynthia was a young single mother of two with another child on the way. She and her children had gotten off to a rocky start, with numerous abusive relationships with men in their lives, unstable housing, and a poor network of sup-*

port. Because Cynthia relied on her boyfriends for housing, when they hurt her she had nowhere to turn. Throughout her work with an in-home parent counselor/family educator and a domestic violence support group, she maintained a focus on wanting to establish a family and a parenting partnership. She worked through her history of abusive relationships and her worries about how the domestic conflict affected her children. Cynthia set a new course for her life — seeking employment, setting up her own home, and learning about how to be a more stable and available parent for her children. Months after she began this journey, she sat proudly on her couch in her own apartment with her newborn cuddled in her arms and reflected on her progress: "I feel stronger now, knowing what I need for me and what my children need from me. I am ready to find a new relationship, and I know how to choose a relationship that will be good for us all."

Similar to the younger, single mothers in Fitchen's (1995) study, Cynthia experienced many unstable, unsatisfactory relationships. Yet like the mothers in Edin's (2000) study, she maintained a positive attitude toward family formation and marriage and was readying herself to recognize and engage in a healthy relationship in the future.

The impact of childhood family and attachment experience

Along with current personal and social expectations about marriage, childhood experiences also affect attitudes toward family formation and childrearing. It seems that adults, regardless of their own personal childhood family structure (single-parent family, divorced family, or two-parent family), generally maintain positive views toward marriage (Trent & South, 1992). Perceptions of parental marital happiness (Willets-Nock & Bloom, 1993) and day-to-day family life experience (Golombok, 2000) seem to have more of an effect on adults' attitudes toward marriage than the structure of the family in which they grew up.

Personal attachment experiences, based on one's own experiences and interactions with parents as a child, affect one's choice of marriage partner as well as attitudes toward parenting and childrearing. Adults with secure attachment histories most often choose partners with secure attachment histories, but adults with insecure histories do not necessarily choose partners with similar attachment histories. The pairing of certain attachment histories in the marital unit likely helps sets the stage for quality of the marital relationship and the success of the marital unit in providing the support needed for childrearing. For example, mothers who have a high degree of ambivalence (sense of insecurity in one's own relationship) and who perceive lower levels of support from their husbands when they enter parenthood experience a decline in marital satisfaction over time (Rholes, Simpson, Campbell, & Grich, 2001). Adults in dual-secure marriages report less ambivalence about their relationships and greater parenting competence (Volling, Notaro, & Larsen, 1998), and non-married adults with insecure histories report more negative models of parenting and less desire to have children (Rholes, Simpson, Blakely, Lanigan, & Allen, 1997).

Personal attachment experiences, based on one's own experiences and interactions with parents as a child, affect one's choice of marriage partner as well as attitudes toward parenting and childrearing.

Nevertheless, the actual connection between adult attachment styles, family formation, and the quality of parenting is unclear. While one study shows that adult attachment styles characterized by avoidance (and, to some extent, ambivalence) reflect more negative attitudes toward adult romantic relationships and childrearing (Rholes et al., 1997), there is a dearth of research in this area, and the links have not been established (Volling et al., 1997).

The impact of economic opportunity

Access to economic resources further affects opportunities for family formation. In African American communities, findings show a connection between "mate availability" (the relative supply of "eligible" black men), men's socioeconomic status, and women's socioeconomic independence and family formation. African American men and women are more likely to marry and have children in marital unions when men's economic opportunities are better. However, women are less likely to marry and have children within the context of marriage when they have better economic opportunities (including public assistance; Fossett & Kiecolt, 1993). In fact, single mothers on welfare who knew that fathers could not afford to provide for their children wanted to live separately or cohabit rather than marry them (Edin, 2000).

Attitudes, personal experiences, and economic realities all affect the extent to which family formation occurs, and, in so doing, contribute to shaping the context for rearing very young children. In particular, they affect the adult relationships that form the foundation for parenting, and thus the ability of the family to meet successfully the unique developmental and parenting needs of infants and toddlers. Family support professionals working with parents of young children and/or prospective marriage partners may need to be mindful of the forces that affect the formation and quality of the marital relationship.

Ecological Factors That Shape Adult Relationships and Their Impact on Children

What is assumed from the conclusion that intact two-parent families are the most appropriate for the rearing of very young children is that the marital relationship has a positive impact on the *parent–infant* relationship. Here we spend some time examining what is currently known about the impact of harmonious and distressed adult relationships on parenting and infant and toddler developmental outcomes across different family settings.

The impact of harmonious parent relationships

Research supports the idea that high-quality marital relationships are linked to high-quality parent–child relationships, and lower quality marital relationships are linked to lower quality parent-child relationships (the spillover hypothesis — the effects from one relationship "spill over" into another relationship; Erel & Burman, 1995). Essentially, harmonious marriages are associated with sensitive parenting and good child outcomes (Gable, Belsky, & Crnic, 1992; Goldberg & Easterbrooks, 1984). For example, fathers in satisfying, stable marital relationships are more likely to be involved with their children and to feel greater competence and satisfaction as fathers (Cox, Owen, Lewis, & Henderson, 1989; Dickstein & Parke, 1988; Levy-Shiff & Israelashvilli, 1988; Rogers & White, 1998; Volling et al., 1998; Voydanoff & Donnelly, 1998; Yeung, Sandberg, Davis-Kean, & Hofferth, 2001). And couples who are able to manage negative affect and conflict effectively are better able to focus on childrearing and to meet the needs of their very young children (Heinecke, 1995; Lindahl et al., 1997). This is no small challenge during the first years of a child's life, because marital satisfaction /marital quality declines significantly during that time (Broom, 1998; Dalgas-Pelish, 1993; Kurdek, 1999), and declines in marital happiness during infancy are linked to more negative interactions between fathers and 3-year-olds (Belsky, Youngblade, Rovine, & Volling, 1991).

Overall, even in families in which couples choose to get married and to raise children, caring for very young children puts a significant strain on the marital or couple relationship. The capacity to weather that strain and adapt to the challenges of managing very young children and marriage requires couples to have reasonably good capacities to manage stress and cope with changing everyday life circumstances (Heinecke, 1995).

Harmonious marriages are associated with sensitive parenting and good child outcomes, but caring for very young children strains the marital relationship.

The impact of distressed parental relationships

At the same time, distressed marital relationships are linked to parenting and child problems. Marital dissatisfaction and conflict are correlated with less nurturing parenting (Kerig, Cowan, & Cowan, 1993) and problematic developmental outcomes for infants and toddlers, such as more insecure attachments and observed toddler behavior problems (Goldberg & Easterbrooks, 1984; Jouriles, Pfiffner, & O'Leary, 1988).

Marital conflict likely affects the extent to which parents are able to mutually invest and engage in childrearing, or coparenting. Coparenting includes the ways parents support or undermine their partner's parenting and manage their relationship in the presence of their children, whether in intact or divorced families (Susman-Stillman, 2002). While little research on coparenting during infancy is available, some compelling findings indicate that marital distress predicts dysfunctional patterns of coparenting in families with infants and is linked to behavior problems in preschoolers (DeVito & Hopkins, 2001; McHale, 1995; McHale & Rasmussen, 1998).

Troubled marriages may also affect very young children through their effects on the parent–child relationship. Some suggest that while parents can do a reasonable job of shielding their children from witnessing marital conflict itself, they are less able to shield them from the negative effects of marital conflict on the parent–child relationship (Erel & Burman, 1995). They also suggest that it is more difficult to create a strong and positive parent–child relationship in the face of marital discord. Recent evidence supports this hypothesis. Frosh and Mangelsdorf (2001) found that more hostile and intrusive parental behavior seemed to increase 3-year-old children's vulnerability to the negative effects of troubling marital behaviors. At the same time, they found that warm and supportive parenting buffered the effects of great marital conflict or less marital engagement on child behavior problems.

The ways parents handle marital discord, including ending an unhappy marriage, may lead to more responsive caregiving for young children. In one study in which couples with very young children who were consistently unhappy in their marriages were compared with couples with very young children who experienced declining satisfaction with their marriages (Heinecke, Guthrie, & Ruth, 1997), a significant proportion of both groups of couples divorced by the time their children were 4 years old. After the divorce, the parents who had been consistently unhappy in their marriages became more responsive to the needs

of their children and the children's expectations of receiving responsive caregiving were better met. This positive finding persisted over time (from 6 to 48 months). For the couples who experienced declines in marital quality and then divorced, there was no immediate impact of the divorce on their parenting or child outcomes, perhaps because these couples tried to maintain an attitude that they could make the marriage work. By age 4, all children whose parents divorced had more positive behavior and less negative behavior than those children whose parents remained in distressed marriages. Parents who were consistently unhappy in their marriages but did not divorce showed a decline in their responsiveness to their children's needs, and their children's expectation of receiving responsive care also experienced a decline. Although this study was conducted with a small sample of middle-class families and should be replicated, the findings reinforce the conclusion that poor marital quality does affect the quality of care parents provide to their very young children. Whether this is equally true of mothers and fathers is open to question, as the evidence does not clearly illustrate that fathering during the infant–toddler years is more negatively affected by marital problems than mothering. However, changes in marital status (e.g., divorce) may affect fathering more than mothering because those changes often entail a disruption of father involvement (Coiro & Emery, 1998).

A recent national study of unmarried families revealed that most fathers were involved with their children at birth and intended to remain involved.

Distressed marital relationships should receive particular attention, as parents in such relationships seem less able to meet the unique psychological needs of infants and toddlers. Unfortunately, most of the available research on marital distress used samples of middle- and upper-income families, so we know very little about how fragile families, or families with low incomes, cope with marital distress. They are likely to have a harder time weathering marital distress and may need even greater supports than we anticipate to ensure their health and well-being.

Influences on paternal involvement

Across studies of married and unmarried families, mothers' support of and positive attitudes toward the father are clearly associated with supportive parent–infant interactions (Carlson & McLanahan, 2002). Related research investigating marital interaction and predictors of divorce supports this perspective, concluding that wives, the "emotional regulators," are key to maintaining the marital relationship (Gottman, 1994).

Mothers facilitate paternal involvement with young children in a variety of ways, including initiating child-centered conversation (Belsky, 1979), encouraging the father to be involved in child care tasks (DeLuccie, 1996), or engaging in harmonious mother–father relations (Coley-Levine & Chase-Lansdale, 1999). In addition, a mother's perception of her partner's involvement in the paternal role is positively related to the father's reported responsibility for and involvement in child care (McBride & Rane, 1997).

Mothers' satisfaction with nonresident fathers is also related to children's well-being (King & Heard, 1999). In one study, some mothers reported that they were satisfied with nonresident fathers' involvement and wanted them to be actively involved, but others reported dissatisfaction with the fathers' involvement (King & Heard, 1999). In these latter families, children had higher rates of behavior problems than children whose mothers were satisfied with nonresident father involvement.

The relationship between the mother and father may be particularly critical for children with nonresident fathers, who are frequently perceived as wanting to avoid the responsibility of raising their young children. While there is limited information regarding the attitudes of unmarried families, a recent study examining a national sample of unmarried families and nonresident fathers revealed that most fathers (interviewed at the time of the baby's birth) were involved with their children at birth and intended to remain involved throughout the child's development (Teitler, 2001). Fathers who anticipated marrying the child's mother were especially involved with their children (Carlson & McLanahan, 2002).

Another study gauging unmarried, urban African American father involvement (by asking mothers; Coley & Chase-Lansdale, 1999) found that half of the fathers were highly involved at the time of birth and when children were preschool age, but that about 40% of fathers moved in and out of active parenting during those years. A positive relationship between the mother and father increases the likelihood of father involvement in spite of fathers living outside the home or getting remarried. Furthermore, it seems that father visitation is not reduced by new maternal partners or highly involved grandmothers (Coley & Chase-Lansdale, 1999), residence, or marriage or cohabitation, but is reduced by new biological children or stepchildren (Manning & Smock, 1999).

Taken together, these findings suggest that the relationship between a mother and father can provide a more or less supportive context for a father's involvement with his children across married, single, and nonresident-father families. (It is worth noting that there are situations, however, such as domestic abuse, where special consideration regarding the parental relationship is needed.)

PHOTO: MARILYN NOLT

The influence of single parents' other adult relationships: Social networks of support and parent–infant relationships

Although marital relationships have been the primary focus of study, the quality of adult relationships and its connection to parent–infant interaction is also an issue for single parents. Our knowledge of single-parent family constellations is quite limited; recent work suggests that there is considerable diversity in the kinds of relationships single parents and their children experience (Fitchen, 1995; Manning & Smock, 1997; McLoyd et al., 2000). In order to successfully parent, single mothers seem to need to build strong networks of social support to surround and sustain them. For example, an exploratory study of the dynamics of successful single parenting (Olson & Haynes, 1993) found that successful single parents (much like those in successful two-parent families) were able to maintain positive relationships with their children when they nurtured their own needs through strong social-support networks such as outside relationships or support groups.

Although marital relationships have been the primary focus of study, the quality of adult relationships and its connection to parent–infant interaction is also an issue for single parents.

Many factors may affect the ability of single mothers to build support networks or to access resources available to them. For example, some studies of single mothers (Simons, Beaman, Conger, & Chao, 1993) show that single mothers with little education tend to have inadequate social-network support, and single mothers under severe economic pressure are more likely to experience negative life events with little social support, resulting in psychological distress and the use of ineffectual parenting practices.

Ethnic background may also affect the type of support that single mothers seek and what kind of support is available. Wagner (1987a; 1987b) investigated the social support networks of Anglo and Mexican American women with very young children who had been single parents for at least 2 years (as a result of non-marital childbearing or divorce). Anglo women relied on their friends for support, and Mexican American women relied more on support from their immediate or extended family. These differences dissipated over time. Second- and third-generation Mexican American women increased their involvement with friends, while first-generation women remained more oriented to family. Mexican American families were less supportive than Anglo families of divorced or separated mothers, and Anglo families tended to give less support to never-married mothers than to divorced or separated mothers.

Certain kinds of social support networks may be connected with enhanced maternal caregiving regardless of family structure. A study of low-income African American mothers (Burchinal, Follmer, & Bryant, 1996) showed that women

with larger support networks tended to show greater responsiveness towards their infants and provided more stimulating home environments to their 18-month-old children than women with small support networks.

As in distressed marital relationships or conflictive parental relationships, the availability of support in and of itself is not always helpful or stress-reducing for many single mothers, and it cannot always be assumed to be a coping resource for families. For example, Jackson (1998) studied welfare mothers' symptoms of depression in relation to social support, parenting stress, and 3- and 4-year-old children's behavior problems. Contrary to expectations, receiving greater instrumental social support (from friends or relatives) seemed to exacerbate the effects of depression on mothers' parenting stress, which, in turn, led to more child behavior problems. The presence of a grandmother in the household also increased the likelihood of child behavior problems. It may be that raising a child together with a resident grandmother is difficult for mothers who have different parenting styles, or who are attempting to establish autonomy and maintain responsibility in raising their children (as we saw in the case with Crystal, above). Other ethnographic research (Fitchen, 1995) concurs that extended family, when also resource-poor, may serve as a drain rather than a support for single mothers and their young children (see also Susman-Stillman & Erickson, 2000).

Many of the apparent differences in young children's socioemotional development can be explained by socioeconomic status rather than family structure.

This research underscores the importance of working closely with families to identify what resources and supports they need, assess how helpful their current support system is, and tailor services accordingly. It can be incorrect and potentially risky to assume that current supports are working or that additional supports will always help.

Economics as a Factor Affecting Parent-Infant Interaction

Across the variety of family relationships, economics shape opportunities for parent–infant relationships. Data show that many of the apparent differences in young children's socioemotional development can be explained by socioeconomic status rather than family structure (single versus two-parent families) (Kesner & McKenry, 2001). Access to financial resources has implications for family functioning and children's development, particularly for families of color, who tend to have fewer economic advantages as compared to Caucasian families (McLoyd et al., 2000).

Fathers' socioeconomic and occupational status may affect fathers' involvement with their very young children. Although some studies suggest that poor economic opportunities have a detrimental effect on father involvement (Coley-Levine & Chase-Lansdale, 1999; Danziger & Radin, 2001), others offer evidence that a father's involvement with his baby is not related to his earning potential (Teitler, 2001). Additional work suggests that that nonresident adolescent fathers who perceive themselves as breadwinners are likely to be involved in their young children's lives (Danziger & Radin, 1990), and that, within the context of a two-parent family, across ethnic groups, higher socioeconomic status/occupational prestige predicts better overall fathering and a better father–child relationship (Levy-Shiff & Israelashvilli, 1988; McLoyd et al., 2000; Woodworth, Belsky, & Crnic, 1996). Although employment and higher levels of welfare benefits appear to increase father involvement and potential cohabitation in fragile African American and non-African American families, they do not necessarily increase the odds of marriage (Mincy & Huang, 2002).

Fathers' work schedules may interfere with consistent quality parenting and family stability (Aldous, Mulligan, & Bjarnason, 1998; Presser, 2000; Yeung et al, 2001). Specifically, a father's hours on the job may interfere with active fathering if fathers are not already participating in a pattern of active caregiving with their very young children, or may have a stronger negative effect on paternal involvement during the week than on the weekends. For fathers married fewer than 5 years, working non-standard rather than standard hours also increases the likelihood of marital instability (separation or divorce).

This issue reminds us of a family we know who worked very hard to balance parental involvement and career choices with marital relationship needs as the wife and husband transitioned into parenthood.

> *Alisha and Mike were excited about the birth of their first child. They knew they needed the financial support of both of their jobs—but both greatly wanted to share in the caregiving experience and not rely on daycare for at least the first year of life. Mike decided to change his hours to the night shift so he could be home with Monique in the daytime and Alisha could be with her at night. They endeavored to create space for couple as well as family time. They shared dinner as a family when Alisha returned from work and before Mike left, in order to catch up on each other's day and to share stories about Monique's rapidly changing skills. They were able to maintain this arrangement for about 18 months, with great benefit to Monique, who formed close relationships with both of her parents. However, the arrangement placed stress on the couple's marriage, and they began to recognize their need for more time together to maintain their relationship. As a result, they made employment and child care changes so that they had similar work schedules and could be home together more often.*

When parents do not live together, legal actions to insure that children receive economic resources may also promote opportunities for parent–child interaction and positive child developmental outcomes. Children who have court-ordered support and receive child support payments have more frequent contact with their fathers (Koball & Principe, 2002). Additionally, payment of child support by nonresident fathers is related to children's early academic success (Amato & Gilbreth, 1999). However, children whose fathers are of very limited means and therefore have difficulty making child support payments may not benefit from father involvement to the same degree (McLanahan & Carlson, 2002; Roy, 1999).

Implications and Conclusions

An examination of the factors that affect the marital and parental relationships underlying supportive parent–infant interactions convincingly illustrates the need for a broad ecological perspective—one that looks beyond family *structure* and focuses on building parental and/or family *strengths*—when working with families who are likely targets of a marriage promotion policy. Although marriage may appear to solve some significant problems facing families (namely, reducing poverty levels), forming and maintaining a healthy marriage and stable family are often challenging. Parents' relationships with each other have considerable implications for the successful nurturing and development of infants and toddlers.

Across ethnic and socioeconomic groups, the parental relationship, regardless of form, is important for healthy infant and toddler development. This conclusion is not surprising, yet in the face of a social policy that promotes marriage, it is useful to ponder the implications for family support professionals. Although the core values of the work will likely remain the same — nurturing infants, toddlers, and their families in ways that promote healthy emotional development and family functioning — the needs of young children's families may increase or shift (e.g., losing benefits if they choose not to marry, or living in neighborhoods with few economic opportunities or few potential partners). We can and still should do relationship-based work — enhancing parents' abilities to manage their own stress and to understand the links between their own relationship histories and their relationships with their infants; supporting parents in seeking and fulfilling educational and career goals; encouraging communication and support between parents and/or caregivers; and helping parents who are isolated expand their social networks -- but in the process, we may discover an increased need for training ourselves to enhance our skills. For example, attention to parental and marital relationships and their connection to infant and toddler outcomes may heighten the sensitivity of clinicians, parent educators, and family support professionals, who may want to include assessment of marital relationship or marital dynamics when working with a child, or an assessment of the parent–child relationship if working in the context of a troubled or even abusive marital or parental relationship (see Erel & Burman, 1995). This may pose additional challenges for some practitioners who have limited training or who do not intend to work in the context of the parental relationship.

Many questions about the complex nature of family formation and parent–infant relationships remain unanswered. We know very little from published research about the parental and marital relationships of fragile and low-income families, or how different family configurations (e.g., single-parent) or economic circumstances affect the quality of parent–infant relationships. And we know even less about how to support appropriately the range of adult relationships that benefit infants and toddlers and their families. Furthermore, from a policy standpoint, although research reports are beginning to suggest that generous work benefits and maximum 30-hour work weeks may have the effect of promoting marriage among welfare recipients, there is much to learn about how to provide an ecological structure that encourages stable adult relationships and promotes successful parenting of infants and toddlers. Infant/family professionals, with their wealth of experience and opportunities to expand our multidisciplinary knowledge base, are in a unique position to be part of the process of shaping practice and policy.

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MARRIAGE: *A Luxury Good?*

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PHOTO: MARILYN NOLT

Everyone recognizes that the American family has undergone a profound transformation over the past several decades. Until the late 1960s, the nuclear family reigned supreme in the United States and throughout the Western world. The standard pattern for family formation in the middle of the last century was very early marriage, rapid family building, and a fairly strict division of labor based on gender. Sociologists and economists explained that the division of labor was an efficient way of managing the tasks of economic support and childrearing. It seemed perfectly "natural" that men belonged in the marketplace and women at home.

In hindsight, it is now apparent that this functional explanation of the family concealed many problems and tensions that ultimately helped to undermine the nuclear family form in the final third of the 20th century. Women were being educated and then relegated to full-time child care, a considerable waste of human capital and an arrangement that created frustrations for many stay-at-home mothers. Men in turn were asked to shoulder the full load of economic support and were denied a chance to become involved parents. Of course, some families defied these strict gender-role expectations, but they did so at a price. Women were discriminated against in the marketplace, and men who eschewed work for family life found little support from their employers.

In addition to the tensions created by these rigid expectations for husbands and wives, marriages of the 1950s were problematic for other reasons. The nuclear family was built upon the assumption that men and women, typically in their late teens or early 20s, could choose a partner for life. The common pattern was for young people to finish school, marry, move out of their households of origin, and establish independent families — all more or less simultaneously. Marriage was the central event in the transition to adulthood. But the expectation that individuals could manage the difficult task of finding a mate and enter a stable union at so early an age was simply not feasible for many young people who did not possess the maturity or skills to form successful partnerships.

The practice of early marriage was linked to the expectation that sexual chastity would be observed until marriage. Of course, many teenagers in the post-war period, just as today, were not inclined to observe these norms. The result was a very high level of premarital pregnancy that resulted in hasty marriages. Close to half of all early marriages were preceded by a pregnancy in the 1950s and 1960s. Not surprisingly, these so-called "shotgun" unions had an extremely high probability of quickly dissolving.

at a glance

- The 20th century pattern of early marriage, rapid family building, and gender based division of labor concealed many problems and tensions.
- The essential feature of today's family is variation.
- Most people in inner-city communities feel they must have the wherewithal to make marriage work before they commit to marriage.
- Couples need financial assistance, child care, time to parent, and counseling when appropriate.

The rate of divorce, which had been slowly going up throughout the 20th century, began to surge in the late 1960s, in part because of the high number of precipitous marriages. It is sometimes said that the liberalization of divorce laws in the late 1960s created the rise in divorce, but this explanation begs the question of why there was public pressure to modify the restrictive practices. The laws were changed because of popular demand: A great number of American couples simply couldn't manage to follow the culturally prescribed script for family life.

"Postmodern" Family Models

These tensions in the nuclear family model — at least as it was practiced in the middle of the 20th century — have ushered in a new family form that some commentators have referred to as "postmodern." It might be more accurate to describe the contemporary model of the family in the plural, because the essential feature of today's family is variation. Marriage remains an ideal for the vast majority of Americans, but the nature of the marriage contract has been drastically altered for many.

First, it is relatively rare for men or women to be virgins at the time that they marry. Most individuals begin to have sex 5 to 10 years before they contemplate getting married. No longer is it considered normative for couples to marry in their teens or even early 20s. The median age of marriage for women is now 25 — for men, 27. Many if not most couples cohabit before they enter marriage. Only rarely do marriages result from a premarital pregnancy, because now many more young people practice contraception or resort to abortion if they have an unplanned pregnancy.

The essential feature of today's family is variation. Marriage remains an ideal for the vast majority of Americans, but the nature of the marriage contract has been drastically altered for many.

Gender roles within marriage have been greatly modified as well. It is expected that women will work and that men will share in domestic responsibilities and child care. A division of labor based on gender still exists, to be sure, but it has gradually eroded. Thus, for some, the nuclear family has evolved into an egalitarian union where men and women more or less share work and domestic labor (often by subcontracting out housework and child care). For others, the family could be described as a neo-traditional model with strong vestiges of a gender-based division of labor. In a small minority of marriages, couples have reversed the traditional gender roles: Men assume more of the child care, and women work outside the home.

The biggest change, however, is that a growing minority of the population, mostly those with less than a college education, are having children before they marry, some not marrying at all. Roughly a third of all first births now occur outside of marriage. About a quarter of these births are to couples that are cohabiting in marriage-like relationships, but many are to single women who do not have a live-in partner.

It is well established that most of these births, especially to women in their teens and early 20s, are unplanned, if not undesired; the vast majority of women who become pregnant out-of-wedlock do not set out to do so. Many couples are still ill-adept at practicing contraception and, when pregnancy occurs, either do not want to abort the fetus or are discouraged from doing so by their partners or families or because abortion has become increasingly difficult to obtain. A small number of these young couples still elects to marry, as once was common, but a majority does not view marriage as an attractive solution to an unplanned pregnancy. Social scientists and policymakers have been trying to understand the reasons and to take actions to either prevent pregnancies from occurring or to encourage young people to marry. But there is little consensus on what policies might work.

Proposed Strategies to Reduce Out-of-Wedlock Births

Two basic strategies to stem the tide of out-of-wedlock births proposed by the current administration seem, at first look, eminently sensible. The first advocates sexual abstinence until marriage. The second promotes marriage in the event of a pregnancy by encouraging couples who might not otherwise wed to enter matrimony. In brief, the policies attempt to re-establish the *status quo ante*.

These policies are, in my opinion, doomed to fail, because they do not take adequate account of the realities of family life today for most Americans. They are also rooted in a spurious and romantic view of marriage patterns in the past century and do not come to terms with fundamental changes that have occurred in our transition to adulthood.

Consider the first proposed strategy: promoting sexual abstinence as a means of discouraging early parenthood. As I have already observed, at least since the 1950s, large numbers of teenagers in the US have been having sex before marriage. The studies completed by Alfred Kinsey and his associates a half-century ago showed a rise in premarital sex beginning in the 1920s. By the 1950s, close to a majority of women had engaged in sex before marriage, even though the marriage age was very young. The so-called "sexual revolution" revealed that the notion of premarital chastity was largely a myth even in the 1960s; it certainly is now.

Numerous studies show that most teenagers currently begin having intercourse between the ages of 15 and 19; by their early 20s, the vast majority of young people are no longer virgins. While the timing and prevalence of sexual intercourse leveled off in the 1990s, US youth, like their European counterparts, do not subscribe to a standard of sexual abstinence and are unlikely to do so because the govern-

ment tells them that they should. (Consider that it is against the law for minors to use alcohol and there are countless programs to encourage teens to refrain from alcohol use. Mostly, these injunctions are ignored or observed in the breach.) I am not suggesting that uniform sexual standards exist in the US or will in the near future. The age at which teenagers begin to have sexual intercourse varies, but most young people have sexual experience long before they contemplate marriage. What injunction could change this pattern?

The second proposed strategy, encouraging matrimony among the young, also seems highly unrealistic. It is difficult to imagine the age of marriage declining to the degree that young people will wed around the time that they become sexually active. Marriage age has risen in all Western nations and is rising throughout the world because it is increasingly impractical for young people to marry until they complete their schooling and obtain full-time employment at a remunerative job. These milestones are themselves taking longer to achieve as more and more young people attend institutions of higher education. Most well paying jobs require a college degree or more, meaning that young people are not ready to embark on forming a family until their mid-20s. Thus, the typical life course for middle-class youth involves a lengthy period of training. The idea of establishing a permanent union is anathema to most young adults, which is one of the principal reasons why provisional relationships and cohabitation are attractive options in this stage of life.

In a group of teen mothers I have studied for 30 years, 9 out of 10 who married dissolved their unions before the children were 18.

Marriage as Problematic

Eventually, most middle-class youth will marry and form families as they have done in the past. The vast majority will be able to form stable — even lifelong — unions. But for less privileged young people, establishing stable partnerships often demands more than merely waiting for an opportunity to enter marriage. Marriage itself has become problematic. Over the past decade or so, a series of studies on low-income families has begun to illuminate why so many individuals are bearing children before they marry or eschewing marriage altogether.

For the past 30 years, I have followed a group of women in Baltimore who bore children as teenagers. My study began just as marriage practices were beginning to change, and, in a real sense, helps to explain why low-income women ceased to marry. In this regard, it is especially illuminating to compare the decisions that the teen mothers made to those made by those offspring who, like their mothers, became pregnant in their teens a short generation later. (Just over a third of the daughters became second-generation teen mothers.)

Whereas the majority of the older generation of mothers married either before or shortly after the birth of their first child, almost none of their children who became pregnant as teenagers followed the same route. It is easy to see why the daughters were reluctant to follow in their mothers' footsteps. Nine out of 10 of the mothers who married dissolved their unions before the children were 18. Those who married the father of their first child were more likely to remain wedded, but 4 out of 5 still separated. Marriage simply did not provide adequate security in the face of the difficult social and economic circumstances of trying to support a family.

When I interviewed the daughters, most acknowledged that they would like to marry someday but were wary of making the same mistake that their mothers had made 15 or 20 years earlier. Most indicated that they would be worse off if they got married and it did not work out than if they never married at all. Not only did they fear that the fathers could not be reliable providers — a necessary condition for marriage — but that the men who had impregnated them might not provide emotional support for them and their children. In many inner-city communities, there is a deep and pervasive culture of "gender distrust" that leads many low-income men and women to regard each other with suspicion.

This culture surrounding male-female relationships is rooted in structural conditions that have to do with the poor economic opportunities of less educated men. Among minorities like most of the families in the Baltimore study, men face a particularly brutal situation when it comes to finding a job. Employers do not regard the men as capable workers, especially if they lack a solid job history or have been incarcerated, as is frequently the case. Women may feel sympathy for the men's plight, but they are not inclined to forgive them if they are unwilling to find stable employment. The men, in turn, sometimes regard the women as insufficiently sensitive to the special problems that they face in the labor market.

Men in the ghettos of urban areas are thought to need a period of "running the streets." They are not ready to settle down to a domestic existence at an early age. When pregnancies occur, they usually do not result in marriages. When I first began to examine the phenomenon of teenage childbearing, it seemed to be disproportionately a practice of African American teenagers. But over the past decades, out-of-wedlock childbearing has become far more common among whites and Hispanics and is not confined to the very young who become pregnant before marriage. It seems that marriage is regarded as a poor bet among a larger and larger share of the American population. In fact, non-marital childbearing has increased in all Western nations just as it has in the US, though in other countries it is far more common than here for it to occur among couples than single women.

In this period of transition from the nuclear family, wariness about what marriage signifies has spread among all Western nations. I trace these doubts to the difficulties that couples face in negotiating relationships that are deemed to be permanent. The high expectations for marriage make it a more difficult arrangement. The women in the Baltimore study say that they don't want to get married until they can be sure that they will have a union like that of their grandparents, who remained together throughout their lives. But they don't always see the hard work that is required to keep such relationships from failing.

Policies to Support Marriage

The Bush Administration is in the process of trying to develop policies to encourage low-income couples to marry in the event of a pregnancy. While such a policy seems reasonable, the plan is without substance. Public information campaigns to promote the desirability of marriage or weekend workshops that impart knowledge and skills to couples are simply inadequate measures for attacking the root reasons for the disillusionment with early marriage among the poor. Without adequate jobs, men will not be deemed suitable partners. Without sufficient support for child care, men and women will struggle to carry out day-to-day family activities. Without some relief from work demands, men and women will find too little time to form gratifying relationships, the *sine qua non* of marriage. The Administration is largely betting that rhetoric and limited services will be a sufficient remedy for the problem.

It is all very well to espouse the virtues of marriage; it is quite another matter to sustain young people with inadequate economic, social, and psychological resources to keep faith in each other.

If we want to get serious about restoring the credibility of marriage for young adults, we must listen to the reasons why women like those that I studied in Baltimore are electing to have a child without marrying. They say that they would prefer to count on their families for help than a partner who has few prospects. Many enter parenthood hoping that they will marry the parent of their child, but when they observe what happens after the child is born, they begin to pull back. Bouts of unemployment, infidelity, substance abuse, and problems of collaborating in childrearing all push them to reconsider marrying. Unless these couples get both substantial material and psychological help from their communities, they will not enter marriage, or, if they do, will not be any more likely to remain married than were their parents a generation earlier.

So if a light dose of counseling will not help, what policies will be effective? Of course discouraging early childbearing is desirable, but postponing parenthood will not strengthen marriage unless something happens to men and women as they move from their teens and early 20s to their late 20s. Specifically, they must increase their educational standing and labor-market skills as well as begin to develop the "soft skills" that make a marriage work. Education helps impart new ideas about sharing family responsibilities, but such notions must be accompanied by the development of actual skills in communication, negotiation, and the capacity to work as a team. Life experience imparts some of these skills, but some young people require deeper and more intensive interventions that can only be delivered by qualified experts.

These policies and programs are neither cheap nor easy to deliver. Think about the challenge of getting a man or woman to enter and remain in college after a poor education in an inner-city school system. Or consider the yet more difficult challenge of finding remunerative jobs for people who have been on welfare or served time in prison. Imagine how difficult it is to keep couples together in cramped housing in neighborhoods with poor services. It is all very well to espouse the virtues of marriage; it is quite another matter to sustain young people with inadequate economic, social, and psychological resources to keep faith in each other.

If we are going to put real substance into the idea that marriage will help improve family life, we must improve the conditions that support and sustain marriages in the face of poverty, illness, uncertainty, stress, and conflict. Religious commitment helps, but generally it cannot override the strains of too many demands and too few resources.

The challenge for those of us who would like to strengthen marriages, unions of all types, and family life overall is to help policymakers realize the folly of promoting worthy objectives without providing the material assistance necessary to implement those goals. Most people in inner-city communities, many of whom are bearing children out of wedlock, would prefer to marry when they have children. For them, however, marriage is a luxury good that cannot be purchased by simply saying, "I do." They feel that they must possess the wherewithal to make their unions work before they commit to them. This is especially true when they enter a relationship sanctioned by the church and the state.

What will it take, then, to create an effective family policy and to give individuals who want to marry the means to do more than utter their marriage vows?

Young couples need financial assistance. The Earned Income Tax Credit is a good start, but it does not go far enough to bring couples above the poverty line. An extension of this progressive pro-family measure is highly desirable, along with an increase in the minimum wage.

Parents need a wider range of child care and after-school programs that enable dual-earner families to manage the burdens of demanding jobs. They require paid maternity and paternity leave, as well as paid leave when family members

are ill. Low-income parents should have medical benefits that provide coverage not just for their children, but for adult caregivers as well. These material supports are routinely provided in most Western nations and, no doubt, help struggling families to endure bouts of unemployment or stints in low-wage jobs.

Parents would also benefit from support programs that provide extensive counseling when marital or child-drearing difficulties arise. Most low-income parents cannot afford or find social and mental health services that sustain them during periods of transition or crisis.

Finally, ***low-income parents need relief from the relentless work schedules that make them chronically stressed.*** For all Americans, family time has become a precious commodity. We have longer working hours and fewer vacation days than workers in most nations with advanced economies. Parents and children alike want more family time, but most low-income jobs provide few vacation days, if any. Creating durable emotional bonds within marriage requires leisure time, but many couples are juggling work schedules and domestic chores, leaving them little time for relaxation and repose.

Conclusion

Our free-market economy, so generous to the well educated and highly skilled, is just as stingy to the low-skilled and poorly educated — the very group that finds it difficult to enter and maintain stable unions. I do not think that this is a coincidence. Unless we are prepared to shift our national priorities to be more inclusive and less tightfisted toward Americans with few advantages, we can expect to see more of them remaining in makeshift families of extended kin or in provisional unions. If we genuinely believe that these arrangements are not desirable for children, then we must be prepared to do more than indulge in rhetorical calls to restore the family. Rather, we must pay what it costs to support children and families. Otherwise, all the talk of a family-friendly policy is only another political swindle.

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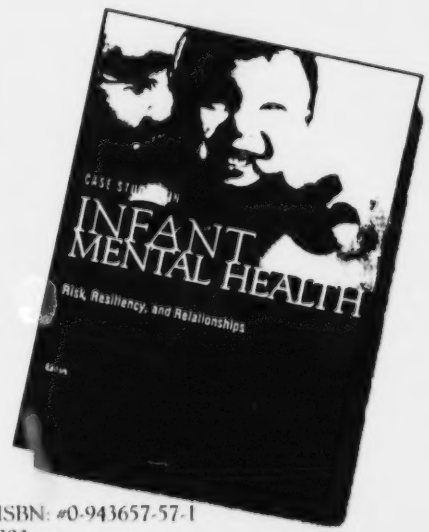

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Very Young Children in Lesbian- and Gay-Headed Families:

Moving Beyond Acceptance

Virginia Casper
Bank Street College of Education, New York City

Photo: Kuni Takahashi

From the other side of the room, Julia (17 months) watches her parents greet each other as her father, Lou, crosses the threshold. As they hug, she stands up, toddles over, and slips herself between them, straining her head way back to see their faces while tugging on their legs. "Uppie, uppie, Papa Lou," she states loudly, pulling on his pants. She reaches to pull on the other set of legs, saying, "Uppie, Dada Pul (Paul)!" with equal determination.

Toward the end of the first year of life, children all over the world begin to consider the relationships between and among their caregiving adults and themselves. With an emerging sense of self and increasing capacity to be sensitive to the inner worlds of other people, awareness dawns that they are part of something larger — an emerging matrix called a family. Julia has been well aware for some time that she has two daddies. Her insistence on joining her fathers to transform their embrace into a family hug is something any toddler might do if she is lucky enough to have two loving adults to be with and care for her.

Babies enter families in many different ways, and the families they enter take many different forms. Consider these possibilities: Is a baby living with a birth, adoptive, or fostered family? Is there one, or are there two, three, or more adults intimately involved with the baby, whether they are living under the same roof or not, and whether they are the same sex or not? Can the baby's pre-history be traced through a sperm bank, a fertility clinic, travel documents, the proverbial glint in someone's eye, or some combination of these?

Julia is among the youngest of a growing group of children in this country with at least one gay parent — a cohort

at a glance

- Between 1 and 9 million children in the US have at least one gay parent.
- Lesbian- and gay-headed families conform to no single pattern or stereotype.
- Adults need to help toddlers understand difference – in family constellations as in other aspects of the world.
- Conversations about lesbian- and gay-headed families should become an integral part of ongoing dialogue about families and young children.

conservatively estimated at between 1 and 9 million (Lauman, 1995). A recent analysis of the 2000 census documents that there are same-sex couples living in 99.3% of the counties in the United States (Smith & Gates, 2001). Just about anywhere in the US, an infant/family practitioner is more than likely to be working with, or to have already worked with, a gay family such as Julia's, or with one of many variations on her family's structure. Pre- and perinatal issues such as infertility and prematurity plague lesbian-headed families with the same frequency as the general population, causing these families to seek out help from our field. And for babies in gay- and lesbian-headed families grow, issues such as learning disabilities, shared visitation, and school choice, for example, loom as large -- and can easily dwarf or interact with — gay-related issues (Casper & Schultz, 2000).

The theories that have shaped thinking in the field of early childhood development have been extremely gender- and class-biased.

Although the phenomenon of lesbian- and gay-headed families appears to have come to pass over the last decade, there is evidence that adults whom we would call gay or bisexual have been raising children since at least the early Middle Ages (Boswell, 1980), if not earlier. Nevertheless, in 2002, the gay baby boom has to be seen in the context of the Gay Rights Movement of the past 30 years, which resulted in a combination of increased visibility and increased numbers of gay- and lesbian-headed families. During this period, through television, film, and fashion, gay culture has become increasingly assimilated (in fits and starts) into American culture. Over the past 10 to 15 years, the phenomenon of gay and lesbian parents has also moved into conversations in the field of child development. But while gay people no longer have to "choose" between being gay and having children, visibility and numbers have not translated into basic rights. There is still tremendous resistance to the idea that gay people and children have the right to experience each other through relationships as much as anyone else.

In the current political environment, some commentators suggest that heterosexual marriages provide the optimal family structure for child development (Popenoe, 1993, 1996; Blankenhorn, 1995). In the light of such assertions, parents and researchers, theorists, and practitioners in the multidisciplinary infant/family field need to clarify our conceptions of healthy development during the first few years of life and what is required to support it. We now have more evidence than ever before about what it takes to promote and protect healthy early development (e.g. Brazelton & Greenspan, 2000; National Research Council and Institute of Medicine, 2000). Yet one of our most difficult tasks is this: how, when confronted "in the moment" with what may be to us a type of family structure or childrearing practice that is "new," to simultaneously begin to sift out the universal from the particular, avoid making premature judgments, and proceed with our work of supporting development (Casper et al., 2002).

Generating developmental conversations from a broad range of parenting perspectives could teach us a lot about *all* families, not just those headed by gay men and lesbians. Unfortunately, the theories that have shaped thinking in the field of early childhood development up until now — and the resulting questions and hypotheses that have guided our research — have been extremely gender- and class-biased. As a consequence, research data direct our clinical thinking and research questions back into recurring conceptual orbits. Going beyond a surface level of "acceptance" to examine same-sex parenting could encourage new thinking about old questions. We might start by investigating the following:

- What are the roots of nurturance?
- How do very young children experience and encode sameness and difference early in life?
- How do sexual orientation, identity formation, and premeditated parenting affect various parenting qualities and the coherence of one's parenting narrative?

More inclusive dialogue could help us better augment, enhance, and promote integration of the wide range of observations and experiences in the infant/family field.

Someone Who Is Crazy About You *and...*

The idea that every baby needs one person who is crazy about her and at least one other to support that person (Bronfenbrenner, 1989) is hardly new. Yet even readers who did not immediately assume, while skimming the opening vignette, that Julia's other parent was her mother might be hard-pressed to come up with theories that allow us to consider the intrapsychic dynamics of this scenario within a positive frame.

Most of our theories about the child's early development in relation to his family are based on research and theories from family forms that are at least 2 generations away and worlds apart from Julia and hundreds of thousands of other children. In the 21st century, practitioners work with very young children who are growing up in single- as well as dual-parent families, or with extended families. They are growing up in families in which parents are of different races, different religions, or in which one parent may be transgendered or bisexual. Children are also growing up in foster care and institutional environments such as prison nurseries or residential treatment programs. Many of these caregiving environments do not fit past stereotypes of "family," and lesbian and gay parents can be found in any of these family forms. To understand how

Julia is developing in the context of her family, we need to find out what her life is like from her family's perspective.

When trying to understand any sub-group of a population, one must consider multiple aspects of a family's identities and experience. It is important to know that there are a number of definitions as to what constitutes a lesbian- or gay-headed family — not competing sets, but certainly quite a range. Consider, for example, two obviously differing groups of parents who are frequently lumped together — lesbian mothers and gay fathers. But that is only the beginning. How different is the experience of a girl growing up with two gay fathers in rural Illinois from that of a boy with two lesbian mothers growing up in San Francisco? Class, race, ethnicity, geography, and the degree of homophobia internalized in the gay or lesbian parents, their extended family, and their community all figure into the experience/identity mix quite largely as well.

There are still more variations on the theme of early childhood experience in a lesbian- or gay-headed family. Babies and toddlers in such families may be adopted, fostered, or birthed. They may be raised in families where the sperm donor was known or where he was unknown, or where the biological mother was known or unknown. Some children are raised by their two mothers with their biological father playing a significant role — from across the street or across the state. Other children have a single-parent father who happens to be gay and may be searching for a partner.

"In the Best Interests of the Child"

- Same-sex couples are denied all the state rights and responsibilities of marriage (with the exception of Vermont) as well as the more than 1,000 federal benefits and protections of marriage. (HRC, 2002)
- In many states, only a child's biological parent is legally recognized, resulting in problems in joint custody, or even any kind of visitation, should the same-sex parents separate. There are financial, medical, and educational decisions that are severely compromised for families in these "at-risk" situations.
- Professional organizations that have issued statements supporting lesbian and gay parenting (biological, foster/adoptive, and second-parent adoptions):
  American Academy of Pediatrics – www.aap.org
  American Law Institute – www.ali.org
  American Psychiatric Association – www.psych.org
  American Psychological Association – www.apa.org
  National Association of Social Workers – www.naswdc.org

Julia was adopted at the age of 2 months. She lives with her two fathers in a 2-family row house in Chicago. Papa Lou's mother lives on the other side of town and sees the family a few times a month. Dada Paul's younger sister, Claire, lives upstairs with a roommate. Whenever possible, Claire takes time from her job and college studies to play with Julia.

Like any other group of families, lesbian- and gay-headed families conform to no single pattern (or stereotype).

Myths and Realities

Lesbian- and gay-headed families are often described as "families of choice." Yet raising a child in a lesbian- or gay-headed family is a "choice" that brings with it societally imposed hurdles that no parent would ever seek out. Choice is complicated. Lesbians and gay men must indeed go out of their way to have children — something that most heterosexuals do not have to do. But in the US, race and class, as much as sexual orientation, influence who gets to choose what where reproduction is concerned. So we ask: Do most American adults today have more choice about whether and how to bring children into the world than their parents and grandparents (Cowan & Cowan, 1998)? Certainly many do. Yet mothers who were born into poverty are less likely than other women of their generation to have substantially different choices from their mothers before them, regardless of sexual orientation.

Research on and media depictions of gay-headed families have focused almost exclusively on the white middle class (Casper & Schultz, 2000; Patterson, 1995; Stacey & Biblarz, 2001). Labor economist Lee Badgett (1997) has shown that much of the data about gay-headed family income is derived from skewed marketing research samples and media reporting. According to Badgett, gay men and lesbians actually make 5% to 27% less than their heterosexual peers. There also appears to be a parallel between one's socio-economic status and one's willingness to come out. Although it is by no means the only factor in the decision, the lower a gay person's income, the smaller the chances that he or she will share his or her sexual identity with the world at large (Casper & Schultz, 2000; Greene & Boyd-Franklin, 1996). For low-income gay men and lesbians, coming out may indeed pose a significant risk to their security or livelihood, or both.

Individuals whose demographic characteristics are similar may still find quite different meanings in their experience of being gay parents. For example, some lesbian mothers actively search out male role models for their boys. Others find the notion of a "male role model" too over-determined a concept; they believe that children seek out the people they need in their lives. Still other lesbian mothers find a middle path reflected in such statements as: "We do not consciously look for men to include in [our son's] life, but it just so happens that our lives include men" (Deaner, 1997, p. 66). Ethnographic work has shown

that this issue poses potential conflict for lesbian mothers, who must find their own solutions amid intense societal and familial pressure to somehow make up for what is perceived as a lack. This is especially, although not exclusively, true when the child is male (Casper & Schultz, 2000). To date, data about gay fathers raising children from birth are scant. We can only hypothesize that gay fathers may feel equivalent pressures to provide female "role models" for their children.

Lesbians articulate a range of views about having children. On one end of a continuum is the view that lesbians who have children are defying gender roles; at the other end is the view that such a choice demonstrates assimilation into a traditional female behavior (Lewin, 1993; Weston, 1991). One reality confronts all lesbian- and gay-headed families in this country: They are denied basic rights that heterosexual families take for granted. It is of course ironic that American gay and lesbian citizens are not legally permitted to marry — as marriage per se is a sanction that is theorized by some to protect children (Horn & Bush, 1997). Professionals in the infant/family field might recognize, however, that the denial of basic family rights to gay and lesbian parents also constitutes a denial of basic rights to their children. The "best interests" of children growing up in lesbian- and gay-headed families are threatened in the context of foster care, adoption, divorce, and other everyday situations. Health insurance for a child may be available only through the "legal" parent's coverage (see sidebar, page 20). And when separations and "divorces" do occur among (so far, mostly) lesbian-headed families, these families must endure the wrenching pain experienced by straight families, but without the mediating influence of courts, which, for better or worse, define the rights and responsibilities of most parenting adults.

One reality confronts all lesbian- and gay-headed families in this country: They are denied basic rights that heterosexual families take for granted.

Toddlers Learn About Families

Toddlers, of course, do not learn about lesbian- and gay-headed families — their own or other children's — from the research literature. They learn about families from their daily lives. By their very participation in community life, young children and their gay and lesbian parents become part of the family "curriculum." Put another way, the world of early education and care — including child care, early intervention, playgroup, and Early Head Start — all expose the private family to a more public domain. Adults are forced to make decisions about if, when, and how they should come out about their family.

After the pediatrician, the next professional a lesbian- or gay-headed family is likely to meet will be a child care provider, an educator, or an early interventionist. Toddlers in gay- and lesbian-headed families who are, developmentally, in the middle of figuring out who they are in their families, enter early childhood programs with children who represent a range of other family constellations. For toddlers in gay- and lesbian-headed families, it is "traditional" families who are "different." In our era, adults must remember that, for hundreds of thousands of young children, there has never been a world without lesbian- and gay-headed families.

Across the country, reflected in community to statewide referenda, controversies have erupted over when, if, and how to include gay-related material in pre- and elementary school curricula. In contrast, there have not been — nor, I hesitate to predict, are there likely to be — "culture wars" about toddlers learning about each other's families. For very young children, other children, parents, and families *are* the "curriculum." Very young children spend their time learning each other' names, habits, and preferences, and, gradually, those of their peers' caregivers, parents, older siblings, grandparents, and babysitters. "The more mommies or daddies the better," seems to be the sentiment behind the glee expressed by very young children who learn of their friends' same-sex parents. But early childhood professionals must remember that, as early as pre-school, children invariably discover another word: "fag," and that this term connotes dislike and disrespect. Small windows of opportunity exist to help children connect the dots and provide a "continuity in early care and education" around issues of difference. Adults need to help children to bridge gaps in understanding and make sense of their world. As with many other interventions, earlier is better.

Generational and Family Issues

What are the experiences of same-sex parents and their young children within their families of origin and their extended families? An exploratory study of lesbian mothers has found that family acceptance is more widespread than rejection (Patterson, Hurt & Mason, 1998), but it is rarely taken for granted, given the deep devastation experienced by those who have been "excommunicated" from their families of origin. For parents of gay adult children, the news of forthcoming grandchildren forces them to revisit their (adult) children's coming-out process anew (Martin, 1993). For parents of lesbians and gays, the powerful desire for grandchildren usually wins out, but some never resolve their conflicts and fears sufficiently to take on the grandparenting role.

Grandparents who are personally and geographically inclined to develop relationships with their grandchildren are brought into the extended family life of gay and lesbian-headed families and thus have opportunities to demystify gay family life to others (Patterson, Hurt, &

Mason, 1998). The data from this study support anecdotal reports that children in lesbian-headed families have access to relationships with adult men as well as ongoing family relationships with women with whom a lesbian mother had a previous romantic relationship. Having many "aunts" is a different — but substantial — form of family support.

Data also suggest that in other aspects of family life, gay fathers and lesbian mothers share household and caregiving duties more uniformly than heterosexual parents, with lesbian mothers more likely to be open to non-traditional gender roles (Patterson, 1995). So far, the children of lesbian parents appear to be largely heterosexual, although with greater openness to diverse sexual experiences (Golombok & Tasker, 1996). (A similar fact, rarely mentioned, is that most lesbian and gay parents emerged from heterosexual families of origin.) The implications of a gay identity on parenting within this generational sandwich have yet to be explored.

Coming Out: Its Effect on Parenting

Theories about the general coming-out process now abound (Cohen & Savin-Williams, 1996; Ryan & Futterman, 1998). Less thought has gone into the specific adjustment lesbians and gay men must make in their transition to parenting in a heterosexual world. Al, a gay father raising three foster children with his partner, describes his transition starkly. He provides a sense of the shifting alliances he and his partner experienced as they were accepted into their families of origin.

> *It's interesting, but … before I had the kids, I would go to* [family of origin] *and all they would talk about was the kids. It was kind of lonely after a while, listening about their kids, their kids, their kids. I found out that after we had ours, all we did was talk about the kids. So we fit right in with them. We had something in common. Our single friends had very little in common with us now. We were included in a whole other realm. Now we were* [like] *our family in terms of meeting new friends who also were gay and had children. Also, the* [partying] *days were over, and I haven't been to a movie for 2 years.* (Casper & Schultz, 2000)

Disclosure is one of the aspects of identity formation shared by gay people regardless of whether they are parents. However, the consequences of disclosing one's sexual orientation to one's child's caregiver or pediatrician clearly affect a wider circle of people and are threatening in different ways from the consequences of coming out as a single adult. The developmental transition to parenthood has been well documented as a time of stress and changing roles (Cowan & Cowan, 1992). Coming out as a lesbian or gay parent has the potential to intensify these stresses, depending on the other variables in a particular family's life. We might have something to learn from the flip side of this stress, however. Making a conscious choice to go against the grain and raise a child as an "out" gay or lesbian adult provides an opportunity for deep psychological work. Clarity and self-confidence go a long distance toward helping gay and lesbian parents move through the sometimes distinct yet often ambiguous challenges of raising a child in a straight society. What, for example, might lesbian and gay parent narratives teach us about the effect of such identity work on quality of attachment or parenting styles? Research using the Adult Attachment Index, or a variation on that tool, for example, has yet to include gay or lesbian parents (Hesse, 1999; Mohr, 1999).

Regardless of the amount and depth of work a parent may do to prepare to come out, very often it is the child who helps the gay family come out — without conferring with her parents as to the best time or place.

> *It is a weeknight at about 6 PM. Lou and Paul are in the home stretch of the last aisle of the supermarket, their cart full of groceries. Julia is perched in the child seat, her left arm wrapped around her stuffed "dog-doggie." With her free hand, she helps herself to goldfish crackers. As they load their groceries onto the checkout counter, the cashier smiles at Julia (who, at the time of this story, is over 2) as she rings up the first items. Winking at the men, she says, "Mom's night out, huh?" then comments, "What a beautiful child." Scanning the men's faces for a reply, her expression tightens momentarily as if she is confused. "Who's the lucky one to be your daddy?" she asks no one in particular. Julia, in her excitement, throws dog-doggie into the air. He lands on the checked-out groceries. Julia proclaims, "My two daddies! Papa Lou and Daddy Pul!"*

This story has a relatively good ending. Paul explained their family structure to an increasingly curious but friendly cashier. But it had been a long day, Paul and Lou just wanted to get home, and Julia had already had too many crackers. Lou's comment? "I'm not always in the mood to be a public service announcement. Don't some people get paid to do staff development?"

For most "out" gay and lesbian parents, being responsive to comments and available for educational conversations comes with the territory. We know that one route to mainstream enculturation of children — including teaching rules that have a foundation in "gender hierarchy and compulsory heterosexuality" (Butler, 1990) — is repetition. It stands to reason that enculturation along *non-mainstream* pathways would require at least equivalent, if differently situated, repetitive experiences. Research concerning children's perceptions of their families into middle childhood reveals a continued awareness of the unique aspects they appreciate. Children raised by primary caregiving fathers, for example, have expressed some version of their family being "specialer" (Pruett, 1992). Children Julia's age and older also learn and benefit from hearing their family "explained." This experience may perhaps provide clarity and coherence that protect them against any later taunts or challenges from peers. Further research may also provide

evidence to show that children raised by gay men or lesbians are indeed more likely than their heterosexually raised peers to be accepting of diversity in general, as informal reports have indicated (Rafkin, 1990; Drexler, 2002).

On Difference: What Matters?

Given the heterosexist bias of our world and psychology's fascination with prediction, it is not surprising that, in most research on gay families, little effort has been spent on detailed inquiry into children's actual experiences. Most has been acutely attuned to the issue of *difference* — i.e., are these children different in any significant way from children raised by heterosexual parents? (See sidebar below.) Less effort has been spent on detailed inquiry into children's experiences growing up. Studies showing that children raised by same-sex parents are not essentially different from other children have been useful, however. In wrenching custody cases across the nation, these data have helped

These charts offer global representation of research only. Please see references for comprehensive reviews of both gay father and lesbian mother research to date. Also try www.familypride.org for resources and other helpful organizations.

A Quick Summary of Research on Children of Lesbians

First Wave of Research, 1970s to the early 1980s	Looked at:
Children raised by lesbians (who mostly had these children in heterosexual marriages) COMPARED with children raised by women in ongoing heterosexual marriages. ***Findings:*** No statistical differences	• Basic Mental Health (child) • Gender Identity • Gender Roles (child) • Parenting Styles/Attitudes • Sexual Orientation (grown children)
Second Wave of Research, mid-1980s to mid-1990s	
Children raised by lesbians (increasingly, women in these studies had children AFTER coming out, raising children in a couple) and were COMPARED with children raised by heterosexual parents ***Findings:*** no statistical differences	Same variables as first wave
Third Wave of Research, mid-1990s to the present	
All of the above, plus meta-analyses of current and prior studies and research questions that begin to look under the surface ***Findings:*** Subtle differences that present interesting questions for further study	Same variables as earlier waves, plus • Role division (parents) • Family support • Relations with families of origin, schools, etc.

Quick Summary of Research on Gay Fathers and their Children

Most studies on gay fathers (1970s through early 1990s) researched gay men who were previously married COMPARED with non-parenting gay men OR with heterosexual fathers	• Paternal Identity Issues • Parenting Styles/Attitudes
Findings: Subtle differences that present interesting questions for further study and need for increased research on gay fathers (including more research on men as foster and adoptive parents) and their children—groups that are sorely under-represented in the literature	
No statistical differences	• Sexual Orientation (child) • Child Socialization

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significant numbers of gay parents (mostly lesbian mothers) argue successfully for basic rights of visitation or custody (Human Rights Campaign, 2002). But the underlying question about how children raised by same-sex parents "turn out" turns out not to be simply, "Are these children different?" but, "Are they gay or straight?"

In the most recent wave of research, investigators have revisited studies from as far back as the early 1980s and asked a commonsense question that looks homophobia right in the face: i.e., how it can be that being raised by two mothers or two fathers wouldn't create some different, if less explicit, range of possible outcomes for children's development than being raised by a mother and a father? (Stacey & Biblarz, 2001). The impetus for looking at more subtle differences was actually provided by Alisa Steckel (1985) in her pioneering research on the early psychology of children raised from birth by lesbian mothers. Steckel's dissertation study compared the separation-individuation process of a group of 3-year-olds in lesbian-headed families to that of 3-year-olds raised in heterosexual families. While there were more similarities than differences overall, she found that the children in heterosexual families had a more "aggressively tinged" separation process, and were seen by teachers and parents as bossier and more self-assertive. The children of lesbian mothers, by comparison, were seen as more affectionate, responsive, and verbal, and demonstrated "a more lovable self-image, although expressed through more helplessness." Steckel used a range of current theories of the time to hypothesize about the meaning of these small yet provocative findings. Almost 2 decades ago — and before a political backlash forced a body of research to focus primarily on "sameness" — this researcher was asking important questions that still have not been thoroughly pursued.

How can it be that being raised by two mothers or two fathers wouldn't create some different range of possible outcomes for children's development than being raised by a mother and a father?

Beyond Gender-Related Explanations

Lou has been distraught for 3 weeks and really doesn't know to whom to turn. Seemingly out of nowhere, Julia has become fascinated with Paul. Up until about 17 months of age, she would seek out either of them for comfort or help, and had a routine for certain activities with either Paul or Lou. If only one parent was around, she eased into whoever was home. Now that she has joined a neighborhood playgroup 2 mornings a week, they share her care almost equally. But recently, Julia has begun to seek out Paul for almost everything — at least it feels that way to Lou. One morning this week she collapsed on the floor crying for Paul, while Lou stood by helpless, unable to get her dressed. Paul tells Lou to try this or that, which irritates Lou to no end. They have started to squabble about the situation. Lou finds himself thinking about Julia all the time. In dark moments, he begins to worry that he is not a good parent.

If Lou was Louise and was Julia's mother, she might be able to look this issue up in one of her child-rearing books, or speak with confidence to the facilitator of Julia's playgroup. Temporary fascination with one parent over another is a fairly common, although not universal, toddler phenomenon. Louise's mother might tell her, "Julia needs her father more now that she is growing up." (When these temporary allegiances spring up in 2-parent heterosexual families, there is a tendency to offer a gender-related explanation rather than first consider some other possible reasons.) Lou finally finds the courage to raise the issue with Julia's new playgroup leader, a young, enthusiastic woman whom Julia adores. She cheerily suggests that it is probably temporary, that maybe Julia is at the beginning of her "terrible twos," and that, regardless of the reason for Julia's behavior, there's probably not much to worry about, because Julia is such a great kid. This response only increases Lou's frustration.

How did the gender paradigm for understanding important aspects of early development become so dominant? How did it develop into such a polarized (Bem, 1993) and reified lens? A look at history shows the rise of a new scientific analysis and medical pathologization of sexuality and gender non-conformity of any kind — homosexuality being but one example— as early as the mid-to-late 1800s. This can be seen in response to a host of changes in sexual and domestic relations and a growing movement for women's rights (D'Emilio and Freedman, 1988). The notion that the *balance* of a maternal and paternal presence is, ipso facto, best for children also originates from a psychology of gender polarity.

Whatever one's historical analysis, for decades, the father worked, the mother stayed home, and a tight mother–baby dyad predominated — at least in most white, middle-class families. Families like this have been the population on which almost all research studies on maternal and paternal behavioral styles have been based. A review of the classical separation-individuation literature reveals an overriding assumption that there was something inherent about the father that could help the toddler separate from the mother and move him along on the path into the world. Today, it is not just lesbian- and gay-headed families for whom the "knight in shining armor" or the "uncontaminated other" persona (Abelin, 1971) is problematic. If not always directly, these ideas have nonetheless had an uncommonly strong and enduring influence on thinking in the field of child development and far beyond it. And now

more than ever, the field is aware that it is difficult if not impossible for (one) theory (new or old) to explain development across the range of family structures that currently exist. So if we hypothesize that Julia is using Dada Paul to become more of her own person, especially in relation to Papa Lou, what theoretical frames might be helpful here?

Someone Who Is Crazy About You *and*...Revisited

It can be advantageous for young children to interact with more than one involved, caring adult, although one adult, if just the right one, can make all the difference in a child's life (Bronfenbrenner, 1989). When young children have two caring adults, they may benefit from the diversity of these individuals' distinct behavioral styles (Cabrera et al., 2000), but they may not need a parent of each sex for optimal development (Schaffer, 1990). The very discussion about the extent to which traditional parental behavioral differences (father-as-playmate versus mother-as-caregiver) transcend culture or gender is caught in our gender-based frame. From the infant or toddler's point of view, it seems necessary for parents — whether two women, two men, or one of each — to differentiate themselves, period. A child experiences any two parents differently, because they are distinct individuals.

Recent arguments against gay and lesbian parenting based on same-sex pairings come out of a fatherhood initiative based in large measure on the "fatherless" literature (Wardle, 1997; Blankenhorn, 1995; Popenoe, 1993). (This work must be distinguished from "fatherhood" research, which more directly concerns the level and quality of father–child relationships. Researchers are taking increasing care to investigate not just fathers' lack of involvement, but also the complex contexts that are likely to lead to a deeper understanding of the ways in which fathers do interact with their children and contribute to their well-being [Roopnarine et al., 2001]. This important body of work examines current dilemmas of nurturance, men's commitment to biological and non-biological offspring, and strategies for helping fathers across a range of cultural communities elaborate their parenting roles [Lamb, 2000; Parke, 1996; Pleck, 1997]. Incorporating research on gay men's parenting motivations and choices can only enrich our understanding of the roots of nurturance [Patterson & Chan, 1997].)

It is in the "fatherlessness" literature (Wardle, 1997; Blankenhorn, 1995; Popenoe, 1993) that the preference for "one parent of each sex" is described as innately, functionally, and/or divinely constructed, depending on the writer's theoretical outlook. Many of these writers base their conclusions about how children without fathers develop on extrapolations from data on research conducted, in the decades following World War II until the present, on single-mother-headed families living in poverty under extremely stressful conditions. There have been no studies to date about children raised by lesbians living in poverty, nor have there been studies in which lesbian-headed families have been compared with heterosexual single-mother-headed families living in poverty.

Linked to this misreading of data is a commonly held belief that often unknowingly fuels heterosexist assumptions. That is the notion that both girls and boys each need a male and a female parent in order to "desire" the opposite-sex parent and, ultimately, identify with the same-sex parent. The assumption that there must be an *opposition* between desire and identification (Butler, 1995) is open to question. One might also consider that individual differences in children — a powerful factor in so many other aspects of development (National Research Council and Institute of Medicine, 2000) — extends to the ways in which young children respond to the very wide range of experiences that form their gender identity.

Concluding Thoughts

A baby's early sensory experience of other human beings continues in its richness into the second year and beyond. In conjunction with these "sensory" givens, however, toward the end of the first year, babies begin to have a life of the mind. Their "internal working models" of deeply known others become more substantial than their previous impressions, and they begin to create more sophisticated representations of their loved ones. If development is moving along well, babies have utterances or signs for these significant human beings, and can read their emotional moods through an ever-increasing number of lenses. They enact the first words they are learning — up and down and in and out. This growing multidimensionality affects their bodies, their minds, and their relationships. The term "family systems" has deep significance here as one of the key elements of systems theory becomes operative: The family emerges for the toddler as the whole becomes greater than the sum of its relational parts.

In spite of increased inclusion of gay culture into mainstream American life, a strong taboo against discussing the relationships between young children and gay adults persists in early childhood research and practice. This article has argued that simply (and silently) "accepting" lesbian- and gay-headed families will not help the multidisciplinary infant/family field move forward. It is time for conversations about lesbian- and gay-headed families to become an integral part of our ongoing conversations about families and young children. Often outside of awareness, heterosexist bias among theoreticians, researchers, clinicians, policy makers, and the legal community continues to give more weight to the way a family is structured than to the way a family functions. If we, as individuals in this field, each begin to challenge this bias, we will certainly be better able to serve these families well. Equally important is the possibility of considering wider issues of parenting and early development from more authentic, valid, and potentially more generative frames of reference.

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KINSCRIPTION:
Mothers Keeping Fathers Connected to Children

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PHOTO: MARILYN NOLT

Mothers work hard to get their children what they need. They advocate for resources and services for their children from health care, education, and social service agencies. Sometimes mothers must also advocate for resources and care from the children's fathers, paternal relatives, and father figures — especially when fathers do not live with their children.

In an ethnographic study of low-income mothers in Boston, Chicago, and San Antonio, we found that mothers develop a range of flexible father–child relations to enhance their children's well-being. We use the term "kinscription" to describe attempts to "round up," summon, or recruit family members for "kinwork," or intergenerational caregiving (Stack & Burton, 1993). In this article we examine mothers' perspectives on their advocacy for their children, using their own reports of the work that they do in order to recruit fathers into involvement. First, we describe mothers' kinscription of fathers, father figures, and paternal relatives to do kinwork with their children and, particularly in the case of non-residential fathers, mothers' enlistment of other family members to help keep fathers connected to their kids. We also explore mothers' beliefs about the roles that fathers and father figures should play and how these guide mothers' expectations and advocacy for fathers' involvement with their children.

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Our Study

In this article we draw on data from the ethnographic component of the *Welfare, Children, and Families: A Three-City Study* (a detailed description of the study and a series of

at a glance

- Low-income mothers make extraordinary efforts to secure men's responsible involvement with their children.
- In low income families with young children, there are many patterns of male involvement.
- Mothers discourage involvement from men who may not enhance children's well-being or the stability of the family.
- Mothers encourage involvement that brings financial and in-kind support, consistency, and a sense of belonging to children.

reports are available at www.jhu.edu/~welfare). Ethnography is a method of studying, over time, the day-to-day activities and experiences of a group of people through close observation and in-depth interviewing. It results in holistic analysis that seeks to depict the complex influences on people's lives, the constraints and opportunities they manage, and how they think and act in the various worlds they encounter — for example, family, work, schools, public assistance programs, and health care agencies.

To gather ethnographic data on families in *A Three-City Study*, we employed a method of "structured discovery" in which in-depth interviews and observations focus on specific topics but allow enough flexibility to capture unexpected findings and relationships. Our interviews covered family economics, child development, parenting, intimate relationships, support networks, family routines, and home and neighborhood environments. In addition to conducting interviews, ethnographers are participant observers in family events. For example, they may be guests at family celebrations such as birthday parties or baby showers, but they also take note of how family members and friends interact in these situations. We use pseudonyms, not actual names, for the family members cited in this article.

We recruited 256 families into our ethnographic study between June 1999 and December 2000. Ethnographers met with each family once or twice a month, on average, for 12-18 months. In a follow-up stage, families were interviewed once every 6 months to identify any changes in their lives, including welfare, work, health, and insurance status. Final interviews with families took place in December 2002. We recruited families whose income was below 200% of the Federal Poverty Line at a variety of settings that serve children and families — for example, Head Start programs, WIC, neighborhood community centers, churches, and local welfare and other social service agencies. Forty-two families were recruited specifically because they had a young child with a moderate-to-severe disability. Among the families:

- 42% were of Latino or Hispanic ethnicity; 40% were African American; and 18% were non-Hispanic white.
- Roughly half (49%) were receiving Temporary Assistance for Needy Families (TANF) benefits when they entered the study.
- Most respondents attended college or trade school, or had a high school diploma or GED.
- More than half of the mothers were aged 29 or younger.
- Almost all families had at least one child who was between 2 and 4 years old at the beginning of the study.
- 57% of mothers were neither married nor living with a partner; 18% were not married but were cohabiting with a partner; 16% were married and living with their spouse; and 9% were married or separated, with the spouse not living in the home.

Our ethnographic approach allowed us to learn about complex extra-familial relations that shaped the involvement of nonresidential fathers and father figures with children. Unlike other studies of father involvement, we examine multiple fathers and father figures where they are present in each family context. Across all three cities, most families had at least two father figures involved with children. In this article, we focus on what mothers told us about how biological fathers, stepfathers, and father figures are involved with their young children. We explore how these complex relationship configurations emerge over time, and then examine a range of reasons why mothers work so hard at kinscription of fathers to enhance their young children's well being.

Patterns of Paternal Involvement

As we got to know each of the families, we found that their relationships with fathers and father figures were constantly changing. When we focused our attention on families where fathers did not live in the home, we found that most of them were biological fathers. However, some biological fathers moved in and out of family homes, and father figures who were neither biological fathers nor living with the family played important roles in children's lives.

Dynamic relationships over time. The story of mothers' efforts to connect their children with caring men is best told over time. It often involved balancing the shifting involvement of biological and non-biological fathers.

> *Jamilla, a 22-year-old African American woman, never lived with Philip, the father of her 3-year-old daughter, Tanya. After a 2-year relationship, they parted amicably. He returned to live with his parents in Jamaica. Jamilla then relied on Tanya's godfather for support with child care. Eventually, Jamilla began to date Jalen, a college student who worked as a counselor and supervisor at a local children's hospital. He moved into her apartment and grew close to Tanya but left after a year. Some months later, Philip moved back into the neighborhood and marginally reengaged with his daughter. Meanwhile, Jamilla recommitted to a relationship with Jalen, who moved back into her apartment. Throughout this period, Jamilla was juggling the shifting "commitments" of Philip and Jalen to act as a father to Tanya.*

When men left the direct vicinity of the family household, relationships and mothers' kinscription efforts shifted markedly, as occurred when Philip returned to his parents' home in Jamaica. Nonresidential fathers from Mexico and Puerto Rico often returned home to visit relatives or find temporary work. Men frequently left their neighborhoods for prison. This enforced separation dramatically altered intimate adult relationships and fathers' involvement with children. Stoney, an African American father, returned to his mother's home to undergo house arrest. Rico, a Puerto Rican father, decided while in prison not to return to the chaos of his relationship with his child's mother. Victor, a Mexican father, blamed his partner for "not being there" for him while he was in prison and began a new relationship with the cousin of a fellow inmate.

Differential involvement with children and other family members. When looking at mothers' efforts to connect their children with fathers, we need to acknowledge that men may be connected to multiple family networks. With children in different families, men in our study and their related kin were involved in different ways with children in each of these families, with significant implications for the experience of the children.

> *Everett, who lived with Lakisha, was involved with Lakisha's three children from a previous relationship and with Jordan, his son with Lakisha. Everett's mother bought designer-label clothing for Jordan, but not for the other children. Lakisha insisted that Jordan stop bragging and making fun of his siblings who did not wear designer-label clothes. When Jordan didn't stop bragging, Everett told him that he could not wear designer-label clothes if he continued to brag.*

> *Nona struggled to provide for her two children, and she eventually lost her lease in public housing. Unable to rely on the children's fathers, she turned to her oldest child's paternal grandmother for support. This grandmother refused to provide Nona with a residence, but she willingly took in both her biological grandson and her non-biological granddaughter to live in a safe and secure home.*

Men in our study supported family members across different family networks. A few fathers had multiple children with multiple mothers. Lamont lived alone, although he had eight children across a number of family networks. Given his large number of children, he felt "spread thin" and had difficulty making a significant contribution to any single child. Ben, an African American father, lived with his ailing mother and provided most of her financial support. The mother of Ben's child believed that Ben "spends too much time helping is mother out [and not enough] helping his own son." Interestingly, some mothers embraced the complex networks in which they found themselves. For example, Kim, a young European American mother, wanted her 15-month-old son to know and interact with his 5-year-old half-brother, the son of his father, Ted, and a former girlfriend. Kim invited the boy to come stay with her and her son, even though Ted no longer lived with her.

Flexible father figures. Some mothers in the study distanced themselves from the biological fathers of their children and cautiously cultivated new father figures.

Lorena, a 29-year-old Puerto Rican mother of three children, moved to her current residence after living in a shelter on the West Coast with the abusive father of her two older children, and in an East Coast city with another abusive man, who was the father of her youngest child. She met and began a romantic relationship with a 34-year-old man from South America, who supported her independence. Lorena did not like to rely on this non-biological father figure for financial support, but he did provide gas money, car maintenance, and the kind of helpful advice that a close friend might offer. Recently, Lorena decided to move down South, a decision approved by her boyfriend, with whom she expects to maintain a long-distance relationship.

Mothers tended not to make hard and fast demands on men who served as father figures, whether they were biological fathers or not, and whether or not they were living in the home. Boyfriends in residence were often simply accessible to the children in the household and kept them from harm. For example, Lawrence, an African American father, watched his two daughters and their two older half-sisters every night when his partner, JoJo, worked. After Luis moved in with Dora, his two daughters, and their two older half-siblings, he watched all the children while Dora worked. Among the study families, flexible fathering was provided by brothers of estranged biological fathers and by new boyfriends who became children's favorites by "coming over to the house and playing with us a lot." Andrej, a Polish father, went so far as to pretend to be the biological father of his son Rafael's older half-brother and took both boys to the park every week.

Potential father figures. Although men's involvement with children was relatively easy to discern in many families, even in the midst of numerous, shifting relationships, some families constructed a network of undefined relationships between children and potential father figures.

> *Emma, a 50-year-old European American woman, was the grandmother and legal guardian of her 4-year-old granddaughter, Sunny. As the ethnographer described, "'Daddy' is a complicated term for Sunny. . . she has been told about her biological father (who does not reside with the family), has called her uncle 'Daddy' while living with him, and also refers to her step-grandfather and her mother's boyfriend as 'Daddy.'" At a Father's Day celebration, Emma acknowledged the efforts of fathers in her extended family, including these four men and seven other men with children (her father-in-law, her husband's brother and his son, her own son by her first husband, her brother and her nephew, and her next-door neighbor.)*

In these extremely complex family and kin networks, mothers managed to create a good fit between each man's involvement to specific children and specific circumstances. For purposes of the study, however, we had to acknowledge that there was not "one type of father" or "one type of involvement," but instead a diverse group of men who performed a range of activities in support of children's development.

What Do Mothers Advocate For?

When mothers try to connect nonresidential fathers with their children, people often assume that they are seeking only financial support (Roy, 1999; Waller, 2002). Mothers in our study, however, described four things they needed from fathers in order to support the well-being of their chil-

dren: 1) the image of the "ideal father"; 2) in-kind and financial resources; 3) trustworthy child care; and 4) social support from paternal kin.

The image of the "ideal father." Research on families whose structures do not reflect some "ideal" nuclear family — a married mother and father with the two children who reside within the same household — suggests that women and men in nontraditional families are not only aware of normative expectations, but often aspire to them as well (Jarrett, Roy, & Burton, 2002). Mothers in our study searched for men who would act like traditional fathers, fulfilling the roles that men "should" play with children — provider, playmate, caregiver, and disciplinarian.

> *Sonya, a 24-year-old African American mother of three children, left her partner's house and took their children with her after he had physically abused her. She told us, however, that he had been helpful in disciplining the children — "fair" and not "over-abusive." Sonya said she had been taught that "there should be a mother in the home, a father at work. [She] should cook, clean, and nurture the kids while the man provided for his family and provided discipline." She felt that the breakdown of such a family would have long-lasting effects on children. Keeping a male role model for her children was the main reason she stayed with their father for so long.*

Some mothers traced their assumptions that "men make the money and wives manage the home" to their cultural upbringing. More traditional assumptions about men's roles as fathers were particularly salient for many recently immigrated Latino families. Yolanda provided some insight into the importance of biological fatherhood in her neighborhood. She "[could] not imagine anyone else playing the father role." She firmly believed that her son knew his estranged father by his smell, insisting that "blood speaks" ("la sangre llama") to children. Many Latino biological fathers, in turn, felt either that "watching babies is women's work" or that their behavior would be suspect if they changed their daughters' diapers, "because she's a girl and I'm a man."

Some mothers gave up seeking responsible involvement from their children's biological fathers. But they did not stop thinking about fathers and feeling their absence.

> *Tanya, the African American mother of 3-year-old Cara, had separated from her husband because of his involvement with drugs. When we met her, she had been the independent head of her household for 8 months, and said, "I will never subject myself to an experience such as that ever again." However, when she could not answer Cara's questions about her father's whereabouts, Tanya began to wonder what it would be like if there were a father figure in the house for her daughter. She also realized how hard it had been emotionally for her own mother to raise three children alone, even though the family had not lived in poverty. Tanya talked about her wish to share the "emotional burden" of raising a child. She began to blame herself for the absence of a responsible father in Cara's life, but said that she "tried not to think about this often, because as a single parent, I've got to do everything that I can for my daughter."*

However strongly they wished to secure a father figure who fit the traditional image for their families, mothers in our study did not rush into relationships in an attempt to fill this need. If they could not rely upon their children's biological fathers, they considered other options — tentatively.

> *Cynthia and her boyfriend Jack supported each other as they suffered through the illnesses associated with being HIV-positive. Cynthia's daughter Sophie called Jack "Daddy," but Cynthia was quick to tell her that Jack was her stepfather. She told Sophie that she did not know who her biological father was, because she was doing drugs when she became pregnant with her. Sensing the lack of a normative father model in her life, Sophie later told Cynthia, "Mommy, I want a new daddy." When Cynthia asked why, Sophie simply repeated, "I want one."*

Many of the mothers in our study seemed to feel obliged to locate the ideal father figure for their children. Since so many of the men they knew transitioned regularly in and out of residences, relationships, and employment, their search was not an easy one.

In-kind and financial resources. The mothers in our study did not mince words when it came to discussing their expectations about the financial support and in-kind services that fathers should provide their children. All mothers in the study firmly believed that providing financial and in-kind support for children was a father's duty. That a father provided at least some tangible support seemed more important to many mothers than the reliability of that support.

> *Sabine, a 23-year-old mother of two daughters, described their father, Earl, as a "good man" when he supported the children financially; took them shopping for clothes, shoes, and food; or "put money in a savings account for their future." Earl had been abusing drugs on and off for 7 years, but Sabine gave him credit for doing "the right thing" when he was "clean." And although she and the children continued to need financial support when Earl was not clean, Sabine seemed reconciled to accepting what Earl had to offer whenever he could offer it. It seemed much more important to her that the children know that some support was coming from their father than that this support be predictable. Reflecting on why she put up with Earl's tenuous material support and moving in and out of his daughters' lives, she said, "At least when he is being a good father, he is really good."*

Many mothers in the study held great expectations for men's financial and emotional contributions to their children at the beginning of a relationship and were disappointed when men failed to provide. Katherine, a European

American mother, waited 4 years before she accepted a marriage proposal from Henry, the father of her children. When Henry lost his job, she put marriage plans on hold. Men's tenuous attachment to the workforce led many mothers to limit their relationships to "pay to stay" arrangements. Yolanda, a Puerto Rican mother, said that "[my boyfriend] and I live together, but we are not really 'together together.' He messed up, and I told him, 'The only way you gonna stay here is if you pay all the bills, do everything.'"

Trustworthy child care. The mothers in our study were the primary caregivers for their children. In fact, child care demands were so great that these low-income mothers often neglected their own well-being and suffered from poor nutrition and health (see Burton, Tubbs, Odoms, Oh, Mello, & Cherlin, 2002; Roy, Tubbs, & Burton, under review). They were desperate for respite care. Sonja, for example, had left her abusive husband, who provided only sporadic child support, but she wished that he could "at least take the kids over to his mother's house for awhile — I need a break sometimes." Many nonresident fathers were able to provide at least an occasional break for stressed mothers who had few other caregiver options.

Most mothers needed more than a break; they needed daily assistance with caregiving. Carla, a young Latina mother with a 4-year-old daughter and 18-month-old twin sons, was able to maintain a supportive relationship with her former partner, the father of the children. In addition to paying $100 in weekly child support, he remained integrally involved as a caregiver for his children. He stopped by the family's apartment every day at 4 PM, after he finished work, in order to "give their mother a break." Often he ate dinner with the family and took his daughter to stay with him at his parents' house on weekends.

To many mothers, the presence of a male partner in their lives offered the possibility of responsible involvement with their children as a caregiver, rather than as a provider. One mother who had no male support said, "If I had a male partner, I wouldn't need child care." Some men "watched" their biological children and other children in the household on a regular basis when the mothers worked, or on Saturday mornings so the mothers could sleep late. Mothers appreciated these monitoring activities, particularly when men were flexible enough to care for children other than their own.

> *Jamilla could not count on financial support from her child's father, and she was hesitant to trust him with much else. Her mother constantly nagged her to spend more time with her daughter, "since she only has one parent who is consistently in her life." When Jamilla developed a relationship with Jalen, an African American college student, she encouraged him to "take my daughter out of my face when I felt stressed and wanted time to myself." As the relationship progressed, Jamilla acknowledged that Jalen's caregiving allowed her to go shopping and on other social outings, which remained a priority for this 22-year-old. She felt comfortable indulging in these activities because Jalen was there to watch her child.*

Because she could rely on her brother to watch her children, Melinda did not feel compelled to find a partner. Many mothers, however, were not at all sure that fathers or father figures could be relied upon to give children adequate care. Carla said that her partner "helps out but could do a lot more. He tries for a day or two, then slacks off." Sara observed that "men are burdens to me and my mother...they aren't trying to better themselves while we *are* trying...[My boyfriend] helps me [sometimes], but he's usually just sitting around all day." Even though many men had excessive amounts of free time, they were not always enthusiastic about the opportunity to care for children. Moreover, problematic behavior made some men's caregiving a mixed blessing.

> *Karen, a middle-aged European American mother, relied on her own father to care for his grandchildren while she worked. Upon his death, Karen had only her ex-husband to turn to for child care. She asked him to come back and watch his daughters in the security of her home, but his drinking and swearing made him her last option.*

In kinscripting men for child care, mothers wanted more than a break from caregiving. Many mothers felt that their children needed an expression of caring from their biological fathers — a symbol of being wanted and being important in his life.

> *Shondra, an African American mother of two children, was concerned about the erratic behavior that was symptomatic of her ex-husband's mental illness. Although she hesitated to rely on him for regular caregiving, she allowed him to take the children on Sunday court-ordered visits. When their father refused to take the children on some weekends, Shondra grew protective. She would "try to make him come get them" even as he showed diminishing interest and forgot to contact them on their birthdays.*

In communities in which most men could make limited financial contributions to their children's well-being, their efforts at caregiving — even if sporadic — took on tremendous importance. Mothers viewed these efforts as both relief for them and as symbols of the men's love and acceptance of their children.

Social support and connections with paternal kin. For many children in the study, paternal kin networks played an important role in their rearing and support. Young mothers frequently relied on the families of their children's fathers for financial support and housing, as well as a sense of paternal connectedness to their children in the form of family rituals and parties. For example, Nina, a 21-year-old mother of a toddler, often stayed with her child's paternal grandparents. They provided her, their son, and their grandchild with an intricate, extremely supportive network. Many Latino fathers had strong relationships with their brothers, who were signif-

icant confidants for the fathers, and advisors to both parents on parenting, jobs, and money matters.

Mothers cultivated relationships with fathers' family networks even across great distances. Many older Latino men and women experienced the pull of their countries of origin, where family support and child care were plentiful. Marabel's husband returned to his family in Mexico when she became pregnant due to frustration over the loss of his family-based network of job connections. Moving to Mexico was never an option for Marabel, whose own family support was based in the United States. Nonetheless, these two parents continued to negotiate decisions about education and lifestyle for their son, and they often involved the father's family members in important decisions. Some mothers pushed vigorously to establish their children's paternity. Vivian's ex-partner denied paternity of his child. After a positive identification through DNA testing, Vivian photocopied the test results and mailed them to the man's mother and sisters in Mexico. She explained that "esto es por si todavia dudan" — this is in case they still doubt [who the father is].

In some instances, mothers did all the work of maintaining meaningful and productive ties with paternal kin. Some mothers criticized nonresidential fathers who they saw as relying too much on their own families of origin. Cassandra, a European American who was separated from the Puerto Rican father of her two children, minimized her former partner's contributions, saying, "He's a chicken daddy — his family watches my baby, and he gets the credit." On the other hand, Francesca, a 22-year-old mother, did not bother criticizing her children's father. She focused on maintaining a strong relationship with the family of Roberto, her daughter's father. Although this family lived in the Dominican Republic, Francesca communicated with them regularly by phone and eventually saved enough money to visit them with her daughter. She also made a special effort to stay in close contact with Roberto's former girlfriend, who had a 5-year-old son by Roberto. Francesca wanted her daughter to know her half-brother and agreed to have him come visit her and her daughter for periods of time as he grew up. She felt her daughter needed ties to her father's family and was committed to doing whatever it took to maintain that connection for her.

Conclusion

Ethnographic data from *Welfare, Children, and Families: A Three-City Study* suggest that low-income mothers must negotiate a complex web of social expectations and commitments in order to secure men's responsible involvement with children. Most of the families we studied had more than one nonresidential male parent, with nonresidential biological fathers accounting for the majority of these father figures. Mothers often combined fathers' involvement with shifting commitments from transitory biological fathers and/or nonbiological father figures, who accounted for another third of all men involved in study families. Combinations of fathers and father figures changed over time. To secure resources for their children's well-being, mothers used a range of kinscription strategies, sometimes even dealing with adversarial father figures.

In our study, we sought not only to document the many patterns of male involvement in low-income families with young children, but also to understand how — and more importantly, why — mothers sought to keep fathers connected to their children. We learned, it turns out, an important lesson in what advocacy entails. Mothers must decide who can serve as an involved father figure in their children's lives. They discourage involvement from men who may not enhance children's well-being or the stability of the family. They also make extraordinary efforts to encourage many types of involvement from a wide range of fathers, fathers' families, and father figures. In the view of these mothers, such involvement provides not only financial and in-kind support, but also consistency and a sense of belonging through family and family-like relationships, all of which are necessary for the enhanced well-being of children in low-income communities.

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The Caregiving System in Separated and Divorcing Parents

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Photo: Marilyn Nolt

Psychologists have often tried to understand separation and divorce as life crises or transitions or, alternatively, as narcissistic injuries to one or both adults (Emory 1988; Johnston & Campbell, 1987). But in my research and clinical work with a variety of "divided" families with very young children, I have learned that neither of these constructs is sufficient to understand the nature and depth of the struggles that parents undergo as they separate, divorce, and develop a co-parenting relationship. Neither are they sufficient to explain the far-reaching ways in which divorce influences emerging parent-child relationships. In this article, I would like to highlight another aspect of the separation and divorce experience — one with enormous implications for the mental health of young children. This is the experience of the failed marriage, or co-parental partnership, as an assault to the parent's caregiving system.

The notion of a *caregiving system* — psychological and behavioral strategies that an adult uses to provide protection for a specific child — is relatively new in the fields of psychology and mental health. My colleague Carol George and I have been developing and conducting research on this topic in the last few years (George & Solomon, 1986, 1989, 1999a, 1999b; Solomon & George, 1996, 2000). Our understanding of the caregiving system grows out of attachment theory as articulated by John Bowlby (1982) and our studies of maritally intact and separated mothers and fathers and their children (Solomon & George, 1999a, 1999b, 1999c). By now, Bowlby's theory has been assimilated into "conventional wisdom" about the development of early relationships. In the process, however, the original ethological and evolutionary roots of the theory are often ignored. By going back to the basics of Bowlby, we in the infant/family field may find fresh insights in familiar material. Thus, below, I briefly summarize the basic principles of attachment theory before discussing how they may be extended to help us think about the development of the caregiving system. I will then go on to show the implications of these ideas for our understanding of and clinical work with separating and divorcing families.

Core Concepts

Attachment is a biologically based, instinctual system. During the course of our evolutionary history, humans have developed a number of innate behavioral systems — a set of psychological mechanisms that resides in the mind. These have arisen through natural selection to serve the basic evolutionary goals of individual and kin survival or fitness. The attachment behavioral system is one of these systems. Its function is to ensure *protection* of the self. Although the attachment behavioral system is easiest to elicit and observe in infants and young children, it is present and active to some degree throughout the life cycle.

S.i. 34

The attachment system is said to be "goal-corrected" — in other words, the child's attachment behavior is organized around the goal of the *seeking protection* of a particular person or people — the so-called *attachment figure*. The behaviors that the child uses to achieve this goal may vary by culture, family context, and the child's age, but the internal goal remains the same for all children. The attachment system is most strongly elicited or *activated* in situations of *real or perceived stress or danger*, one of the most common of which is separation from the attachment figure itself.

The caregiving system is separate from but reciprocal to attachment. Within the parent the caregiving system is the reciprocal, or complement, to the attachment system in the child. Bowlby viewed this system also as biologically based or instinctual. It is organized around the goal of *providing protection*. Thus, while the hallmark of attachment is *seeking* proximity, the hallmark of caregiving is retrieval of the distressed infant or child.

Bowlby had relatively little to say about the development of the caregiving system, but Carol George and I have recently proposed a model of the maternal caregiving system that is consistent with what is currently known and that parallels what is known about the attachment system. In our view, a key feature of the development of caregiving is that, while elements of it can be observed in very young children, it becomes fully organized within the adult personality *only in relationship to a particular child* or some other dependent. Over the course of infancy and early childhood, child and parent develop an affective relationship; they fall in love with each other. The foundation of their love is the felt security each experiences from achieving and providing protection. Over time this relationship, founded on real experience, becomes internalized (represented) in the mind of each.

Thus, the caregiving system does not simply appear in the mind of a parent. There is reason to believe that it has common roots, developmentally and in adulthood, with the parent's own inner model of attachment, but is still distinct from it (Solomon & George, 1986; 2000). Becoming a caregiving parent requires a developmental transformation of the self, which usually is achieved at some point in the transition to parenthood, during pregnancy or in the first months of a child's life (Benedek, 1959; Bibring, Dwyer, Huntington, & Valenstein, 1961; Liefer, 1980). When this transformation of the self is complete, situations of danger and risk to the child should activate the caregiving behavioral system of the parent. That is, in reciprocity with the child who *seeks* safety, the parent now organizes his or her psychological and behavioral strategies in order to *provide* protection. If the parent needs protection herself (in other words, if her own attachment system is aroused), under normal circumstances she would appeal to her own attachment figures.

Most patterns of attachment offer children adequate protection. We know that a range of mother–child attachment relationships may, at least in Western societies, be "good enough." These are the secure, avoidant, and ambivalent relationships that have been identified in attachment research (Ainsworth, Blehar, Waters, & Wall, 1978) and with which many are familiar. In contrast to young children in secure relationships, the avoidant and ambivalent infant or young child may experience some insecurity with respect to the attachment figure and develops some psychological defensive structures in response to this insecurity (Main, 1990; Solomon, George, & DeJong, 1995). However, children with avoidant or ambivalent patterns of attachment are *not* thereby at serious risk for maladaptation or psychopathology (Lyons-Ruth, 1996; Lyons-Ruth & Jacobvitz, 1999).

Attachment patterns in the infant and child are paralleled by variations in the organization of caregiving within the mother, at the level of both behavior and representation (George & Solomon, 1996; 1999; Solomon & George, 2000). We know this both through observation and through interviews that tap the mother's mental representation of her relationship with the child. Although there are qualitative differences among these caregiving strategies, fundamentally each provides adequate protection to the child, and each represents an organized integration of caregiving within the adult personality.

Disorganized attachment is associated with disorganized caregiving. Disorganized infant or child attachment, which appears to be the only attachment pattern that is predictive of psychopathology, is associated with a caregiving pattern that can also be described as disorganized. Caregiving can be said to be disorganized or disabled when the parent abdicates his or her role as protector, leaving the child *physically unprotected or psychologically abandoned*. Although many different circumstances may give rise to abdication of the protective role, our interviews with mothers in normative populations suggest that it is always associated with the mother's perception of herself as helpless or unable to care for her child. Corresponding to the mother's evaluation of herself as helpless, 6-year-olds with disorganized patterns of attachment show us families, in doll play, that literally fall apart and adults who threaten, harm, or abandon them (Solomon, George, & DeJong, 1995).

at a glance

- In attachment theory, the caregiving system within the parent is the complement to the attachment system in the child.
- Following separation and divorce, co-parenting conflicts may lead the parent to question his or her ability to protect the child.
- Cultural expectations may exacerbate parents' inability to cooperate around the care of the baby.
- Professionals should understand that separated or divorced parents need to do painful, difficult psychological work in order to achieve a harmonious co-parenting partnership.

Co-Parenting Conflicts That Disorganize Caregiving

I propose that co-parenting conflicts following separation and divorce can be inherently disorganizing to caregiving because they have the capacity to force the parent to question his or her ability to protect the child, arouse strongly the parent's own attachment system, and sometimes do both simultaneously. Parents may be rendered helpless when they perceive their environments or events as so dangerous that their own need to be protected is aroused. In such cases, the parent may not only fail to protect the child but *may seek protection* by him — thereby laying the foundation for role-reversal in the parent–child relationship. Alternatively, parents may choose to abdicate, consciously or unconsciously, when they feel that circumstances beyond their control prohibit them from taking protective action, render their protection meaningless, or threaten the very existence of the relationship with the baby.

Co-parenting conflicts following separation and divorce can be inherently disorganizing to caregiving because they have the capacity to force the parent to question his or her ability to protect the child, arouse strongly the parent's own attachment system, and sometimes do both simultaneously.

One of the features of some separating and divorcing parents that strikes those who work with them is the degree to which the caregiving system of these parents seems to be disabled. When she observed it some years ago, Judy Wallerstein referred to this phenomenon as a "diminished capacity to parent" (Wallerstein, 1991). For example, a father who had been counseled against overnight visits with his infant daughter responded, "I'm sick of hearing about the baby. She'll adjust. Doesn't anybody care about me?"

Many divorcing parents feel that they themselves are in extreme danger. When domestic violence has occurred, the threat can be very real. Even where physical violence is not a serious issue, separating or divorcing partners may feel psychologically endangered. Their experience can be understood in terms of attachment. In most cases spouses have been, and in some sense continue to be, attachment figures for each other. But in the face of separation and all it entails, that figure is not only no longer available, but is also perceived to be a source of psychological danger or alarm.

The neediness of the parent is exacerbated where an infant is involved. As we know primarily from the work of psychoanalytic researchers (Benedek, 1959; Bibring et al., 1961; Liefer, 1980), the transition to parenthood, including pregnancy and the first year of life, even in the intact household, is a period of tremendous psychological upheaval and reorganization during which past attachment experiences and questions about one's adequacy as a parent are raised in full force and with great immediacy. Pregnant women in particular may feel the need to rely on their partners as attachment figures. Indeed, we know from our research-based interviews that a woman's perception that her partner has failed her during pregnancy and postpartum often precipitates a separation. This powerful disappointment frequently underlies mothers' intransigence around shared parenting after separation and divorce. A mother who feels that her partner neglected or wounded her when she was vulnerable has a hard time believing that he will now be able to take good care of their young child.

A divorcing parent may feel that what is being threatened is his or her very relationship with the child — that the other parent wants to take the child away. This fear may be at least partially based in reality. Paralleling the attachment system in the young child, real or feared threats to the parent–child relationship tend to heighten parents' feelings related to caregiving. The parent is likely to experience an urgent need to remain physically close to the child. This feeling may lead a mother to refuse the father's request for more time with the child and a father to insist on more and longer access to the child even if the child's behavior indicates that this is not appropriate at present.

Caregiving may become disorganized when parents feel that they are being directly prevented or prohibited from protecting their child. This is how mothers feel when the Court requires babies to participate in visitation schedules that mothers believe will be harmful. It is how fathers feel when they are permitted very limited access to the child despite a manifestly powerful bond between the child and themselves. And it is how most mothers and fathers feel when the other parent simply refuses to cooperate with them around the baby's care. Fear for the child and frustration born of this sense of helplessness often fuel intense conflict between parents and massive failures to communicate about the child's needs.

Challenges of Co-Parenting

The concrete challenges of co-parenting a pre-verbal child after separation or divorce when the partner is cooperative — let alone when the partner is uncooperative or is mistrusted — can be formidable. And more often than not, practical challenges are accompanied by psychological hurdles. Some of these arise from the interplay between unresolved feelings from a parent's own attachment history and feelings generated in the more recent marital relationship. Regardless of the source of disorganization in a parent's caregiving system, when the parent abdicates — even temporarily — the infant is left psychologically unprotected. Transitions in the baby's care are often particularly difficult. The baby's attachment system is likely to be strongly aroused by the separations and reunions that accompany joint-custody routines or visits with the non-custodial par-

ent. But since these occasions are one of the few times when separated parents interact, these occasions are also when they are most likely to fight, when each feels most vulnerable to the other, and when they are least likely to be responsive to the child.

Two examples from my clinical practice illustrate this process.

Todd usually picks up 12-month-old Kitty in the company of his parents because Kitty ignores or rejects her father, preferring his mother (Kitty's grandmother). Todd is very embarrassed and humiliated about this, but he is determined to make a relationship with Kitty because he regrets that he abandoned a child from a previous marriage. Today Todd is alone. LuAnn, his ex-wife, waits on the front porch to see Todd and Kitty depart. She is concerned about Kitty; perhaps she also wants to see Todd fail. Kitty protests going into the car, Todd reacts with panic, awkwardly forcing her in. Kitty is furious and has a crying tantrum. LuAnn comes over to settle the baby who, seeing her mother, reaches desperately for her. Trying to avoid an argument, the parents don't discuss what to do. LuAnn puts Kitty in the car, closes the car door, crying herself, and waves goodbye sadly. For several weeks thereafter, this pattern is repeated.

* * *

Donny is waiting in his ex-wife Polly's home for her and Adam, their 20-month-old son, to return from a trip. It is Christmas and the anniversary of the disaster that destroyed their marriage. Donny was totally ostracized by Polly's family, they separated, and now Polly permits him only daylong visits with their son. The year has been one of total loss and sadness for them both. When she arrives home, Polly is tired and surprised to see Donny. She tells him to go. They argue briefly. Donny reverses roles and says self-pityingly to his toddler son, "Daddy has to go now. Mommy won't let me stay."

This situation has extra significance because Donny's most vivid memory from his relationship with his father is of the time when he was 18 and his father threw him and all his possessions on the street. There are many layers of rejection here.

One year later, Polly and Adam have moved to a new home. Adam, who has been missing his father a lot, tells Donny with great solicitousness on the phone, "Daddy, I'm sorry you can't stay here. We don't have a bed for you."

Cultural Expectations and Co-Parenting Challenges

Cultural expectations can interact powerfully with personal biases and distortions to exacerbate parents' inability to cooperate around the care of the baby. In many ways, these cultural expectations determine what parents believe is fundamental for the psychological and physical protection of the infant and young child. For example, it is the long-standing expectation and wish of many mothers to be the primary caregiver and the final authority on what is best for the child. This "executive" role of the mother is a pervasive feature of family relationships in intact as well as separated families (Horn, 2000; Parke, 1995) in the culture at large. In intact families, many mothers serve as the gatekeeper and facilitator of the father–infant relationship: Mothers' judgments about the father's competence are highly predictive of the father's involvement with the child. The "final authority" issue can become a central focus for conflict in the separating family. Many mothers are unwilling to give up their gatekeeping prerogative — indeed, they feel it is essential to their ability be adequate and effective attachment figures. In the context of separation and divorce, fathers may experience this stance as intolerably humiliating and excluding.

Many parents cannot trust or tolerate the impartial stance of the therapist. Therapists sometimes find it hard to resist the temptation to rescue a child from a "difficult" parent or from a visitation plan that seems to be too stressful.

Similarly, for culturally determined and possibly other reasons, many mothers feel as well that they must be physically close and constantly vigilant to protect their infants and young children from harm. Fathers, on the other hand, are typically eager to help the young child master dangers and fear and to feel that the mother is holding onto the child too tightly. Mothers and fathers rarely recognize their gender-related biases about what constitutes "good parenting." They may take the "offending" parent's behavior quite personally or as a sign of the other's essential unfitness. Without a well-functioning marital partnership to help mediate these differences, they can become a major source of parental anxiety and inter-parental conflict.

Clinical Implications

I want to close with some thoughts about the experience of the therapist working with families with infants and toddlers who are going through separation and divorce. As all of those who work with divorcing families know, these parents can bring new meaning to the concept of counter-transference. The level of affect in this work is extreme. Many parents cannot trust or tolerate the impartial stance of the therapist. And sometimes it is very difficult, as a therapist, to resist the temptation to rescue a child from a "difficult" parent or from a visitation plan that seems to be too stressful.

PHOTO: MARILYN NOLT

In yet another illustration of the power of "parallel process," those of us who work with separating and divorcing couples and their young children may sometimes feel helpless and uncertain in ways that are not dissimilar to the experiences of the parents themselves. Some of us may feel that the best interests of the child are served by having access to two parents rather than one. Some of us would like, unconsciously perhaps, to nullify the loss of a "whole" family to the children that come to our care. And all of us would like to spare children the pain of becoming enmeshed in the parent's dying relationship. The sad reality is that we cannot reconstitute separated families or provide therapeutic relationships for these parents and children that can compensate entirely for the losses and challenges which all must now overcome.

Because working with separating and divorcing families with infants and toddlers is so difficult, some professionals may become cynical and impatient, resorting to simple formulas (for example, no child under a certain age should have overnights with the non-custodial parent) or manipulative tactics (threatening a difficult parent with loss of custodial rights). I have found it helpful to remember that the behavior of disputing parents does not simply reflect "selfish" or "narcissistic" needs. As I have suggested, the challenges of co-parenting following separation and divorce may at least temporarily disorganize the caregiving system within the adult personality. The process of contemporary separation and divorce may constitute a profound challenge to deeply held beliefs about the needs of the young child and what each parent requires in order to provide "good enough" protection. The psychological work necessary to achieve a harmonious partnership in these circumstances is akin to and no less painful and difficult than the working-through of bereavement following the death of a child or adjustment to the birth of a child with significant disabilities. Co-parenting in the aftermath of separation and divorce often requires a radical transformation of the caregiving system within the parent to accommodate new and emotionally challenging circumstances. When we understand this, we are likely to be more supportive — and more effective — in helping parents to achieve that goal.

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PHOTO: MARILYN NOLT

PARENTING TOGETHER AFTER DIVORCE:

Navigating the Winds of Change

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Divorce is a time of tremendous change for every person in a family. Parents often repartner (with or without marriage), generating an additional period of transformation as the family is reconstituted. Are these transitions equivalent in their impact on child adjustment? The media are flooded with accounts of the negative aspects of divorce and positive features of 2-parent families. We hear little, however, about what happens when subsequent marriages fall apart. As sobering as the statistics are for first marriages (roughly one-half end in divorce), the marriages that follow are even more subject to dissolution. How can we help families struggling though these metamorphoses? This article reviews some recent findings from intervention programs designed to help families experiencing divorce and remarriage and discusses results suggesting that parenting quality is the most influential factor related to successful child adaptation.

Parenting Apart — Divorce and Single Parenting

The child development literature is replete with studies attesting to the negative outcomes of divorce on family members. Parents are reported to experience disrupted social interactions, loss of social support, stress, maternal depression, and socioeconomic decline. Children and adolescents are known to encounter difficulties such as behavior problems, depression, anxiety, decline in academic performance, and poor peer relationships. While the picture may appear grim, prospective longitudinal studies indicate that most children of divorce develop normally. Following separation and divorce, what differentiates well-adjusted youth from

at a glance

- Parenting is defined by 5 core components – effective discipline, skill encouragement, monitoring, problem-solving, and positive involvement.
- Parental separation and divorce disrupt these components.
- Repartnering means that family members must grapple with unfamiliar and continuously evolving roles.
- In the Marriage and Parenting in Stepfamilies (MAPS) program, developing realistic expectations and goals is a key to success.

troubled ones? A number of studies identify effective parenting as the primary determinant of child adjustment.

Following separation and divorce, stress, depression, and other problems distract parents at the time when children require additional structure, consistency, and guidance. Buttresses such as social support, education, and a stable occupation can protect parents from a downward decline.

The Social Interaction Learning Model, developed by Gerald Patterson and his colleagues at the Oregon Social Learning Center, provides a sound theoretical basis for interventions designed for divorced and repartnered families. This model specifies that divorce and its concomitants (stress, diminished support, depression, etc.) affect children to the extent that these contextual factors interfere with effective parenting. Parenting is defined by five core components — effective discipline, skill encouragement, monitoring/supervision, problem-solving, and positive involvement — that are linked to both proximal and distal child adjustment . Longitudinal research in which divorced families are directly observed increasingly suggests that parental separation and divorce disrupt these components. This disruption may directly affect children's socioemotional development. While these findings are compelling, we cannot specifically understand the cause-and-effect relationship between parenting strategies and child outcomes in divorced families without conducting longitudinal experimental research.

These findings indicate that the best way to benefit children experiencing divorce is to support parents and bolster their parenting practices, and that intervention programs designed to improve parenting skills are likely to result in improved child outcomes following divorce.

In 1984, The Oregon Divorce Study began with the goal of understanding divorce processes that enhance or detract from effective parenting. During the first phase, a sample of 197 single mothers and their sons was assessed within 1 year of separation and followed up for 4 years. Two key mechanisms were evaluated: the effect of divorce on maternal parenting practices and adjustment, and the influence of parenting strategies on child outcomes.

To examine the effect of marital dissolution on maternal functioning, each mother invited a confidant to discuss two topics at the Oregon Social Learning Center, one regarding her personal problems and the other pertaining to parenting. Conversations were videotaped and rated by coders for emotional expression, confidant support, and the quality of problem-solving outcomes. Results indicated that a confidant's negativity predicted less confidant support. The diminished confidant support was directly associated with increases in maternal distress, including depressed mood and family and financial stress. Conversely, confidant support led to a better quality of problem-solving outcomes that, in turn, were associated with more effective parenting practices .

These studies suggest that support from confidants during divorce can significantly benefit maternal adjustment and parenting practices. Consistent with the Social Interaction Learning Model, mothers' distress predicted a decline in parenting quality, which in turn was associated with child behavior problems. Thus, the relationship between contextual factors related to divorce and child behavior problems was mediated by parenting. These findings indicate that the best way to benefit children experiencing divorce is to support parents and bolster their parenting practices, and that intervention programs designed to improve parenting skills are likely to result in improved child outcomes following divorce.

We tested the hypothesis that strengthening parenting would result in better child adjustment during the second phase of the Oregon Divorce Study, developing an intervention-based study to teach core parenting practices and help mothers deal with common adjustment problems associated with divorce. A new sample of 238 single mothers and their 6- to 10-year-old sons was randomly assigned to receive Parent Management Training (the Parenting Through Change [PTC] program) or no treatment.

The PTC program educates parents in the five key components of parenting: effective discipline, skill encouragement, monitoring/supervision, problem-solving, and positive involvement. By randomly assigning families to either an intervention or a control group, we were able to test the hypothesis that, compared to no-treatment controls, mothers receiving parenting skill instruction would exhibit increased parenting efficacy, which would reduce child depression, anxiety, behavior problems, and academic difficulties over time.

Results indicated that mothers in the PTC intervention group maintained baseline levels of parenting effectiveness while control mothers' effectiveness deteriorated. Assessed at 12 and 18 months, experimental mothers displayed significantly higher levels of effective parenting compared to controls. These findings suggest that the PTC intervention produced significant benefits to parenting behavior .

During the next phase of analysis, we tested the hypothesis that gains in targeted parenting skills would result in better child outcomes. Overall, we detected significant improvements for boys of intervention mothers in domains such as teacher-rated aggression and adaptive functioning at school, reading achievement (laboratory tests), emotional distress (maternal report), and association with deviant peers (boys' self-report) relative to the control group .

In sum, data from the Oregon Divorce Study specified that mothers' participating in a parent group improved their parenting practices, which resulted in a reduction in boys' behavior problems. Further, improved boys' adjustment predicted future reductions in mothers' depression. Our findings

suggest that we have identified several fundamental parenting tools that facilitate positive child and adolescent outcomes. We will now consider how these strategies can be applied for families in which one or both parents have repartnered.

Parenting Together — Repartnering and Stepparenting

Many divorced parents begin dating shortly after separation and eventually remarry. Roughly two-thirds of these remarriages occur within 3 to 5 years following divorce. Unfortunately, second marriages are even more subject to dissolution than first marriages. Thus, family structures, roles, and interpersonal dynamics become increasingly more unpredictable as parents enter and leave intimate relationships, marriages, and stepparenting situations.

Unrealistic expectations regarding family life in reconstituted families can be at the heart of difficulties that newly composed families experience.

The notion of stepparents and stepsiblings often conjures up a number of myths — the evil stepparent, the favored stepsibling, the unwanted children from a previous marriage, the interfering ex-spouse, and so on. Unrealistic expectations regarding family life in reconstituted families can be at the heart of difficulties that newly composed families experience. In fact, transitions in family structure and adult responsibilities result in increasingly less well-defined role definitions for a stepfamily's members. Parenting roles are frequently ambiguous, and the expectations of parents, spouses, and children tend to be inconsistent. Family members who are ill equipped to negotiate these transitions effectively may experience marital conflict, disrupted parenting practices, and psychological distress. Indeed, researchers have found that problems with family member roles, expectations, and marital and parent-child relationships are frequently at the root of stepfamily dissolution .

For most adults, happiness depends on the quality of their family and work relationships. Developing a new, functional family system is a challenge for all persons involved. Maintaining balance among work, love, and play can be nearly impossible — particularly during demanding transitions. Unclear role definitions can often result in the sensation that the stepfamily is on a ship without a rudder. Although to some extent they are in this boat together, new partners, ex-spouses, and children may feel overwhelmed by each other's demands. Some members of the family may hunker down and try not to rock the boat, hoping it will stay afloat and on course. Others may busily attempt to craft a new rudder (or oars), send up signal flares, or take command of the ship — strategies that may be more likely to result in mutiny than reaching a safe harbor.

A number of researchers have worked to disentangle the mechanisms that lead to difficulties within stepfamilies. Ubiquitous are declining marital satisfaction, contentious stepparent-stepchild relationships (these tend to escalate during adolescence), differing sibling treatment, greater emotional connectedness with biological children than stepchildren, and more negativity and affective detachment among stepfathers than biological dads (DeGarmo & Forgatch, 2002; Hetherington & Henderson, 1997).

Expectations

Most stepfamilies start out believing in the myth that life in a blended family will be like that in a well functioning non-divorced family. In the Marriage and Parenting in Stepfamilies (MAPS) program, Forgatch and Rains (1997) identify some common misconceptions that parents hold as they repartner:

1. Stepparenting is basically the same as parenting in a biological family.
2. My prior marriage is over, and so is yours.
3. Though my children and I have lived as a one-parent family for a while, it's easy to include my new partner (and kids) in our habits and lives.
4. Our marriage *automatically* gives me both the responsibility and the authority to discipline my partner's kids.
5. I will have plenty of time for everyone: my partner, my children, your children, our children, the animals, my relatives, your relatives, the neighbors, the neighbor's relatives…
6. I'll never resent my partner's spending time alone with his/her biological children and he/she will *never* resent my spending time alone with my kids. Even if we did, we'd never whine about it.
7. Co-managing our money and assets will not create any unusual problems.
8. All of our ex-spouses will send the child support on time.
9. My co-parenting ex-spouse or yours will [surely/never] move [close by/far away].
10. If we run into any major problems as a stepfamily, our relatives and friends will empathize with and support us.

One of the keys to success is to develop realistic expectations and to create a plan to work on one goal at a time. Acknowledging potential pitfalls is a first step in determining which actions may be necessary to get a stepfamily off on the right foot.

Parenting Challenges — "Who's in Charge?"

The MAPS program principles are similar to those of the PTC program. Once again, five key parenting skills — effective discipline, skill encouragement, monitoring/supervision, problem-solving, and positive involvement — are empha-

sized, along with added strategies for stepfamilies (e.g., presenting a united parenting front, the role of the stepparent, and debunking common stepfamily myths).

The intervention builds upon two effective social-learning-based programs, one that strengthens parenting practices to reduce children's conduct problems (and one that fortifies marital practices to improve marital adjustment). These programs were combined and tailored for the specific needs of remarried couples with children exhibiting behavior problems. The goal of the intervention was to ameliorate distress at incipient levels and prevent its development into adjustment problems.

One of the most common parent complaints is that their children do not listen, comply with requests, or follow through with directions. It is essential to provide clear, developmentally appropriate direction to children, and to break tasks and behavioral expectations into small, manageable chunks. Children should receive immediate praise, encouragement, and acknowledgement for cooperating with parental requests. Stepparents are encouraged to respond to positive child behaviors in kind.

In the following section, we will "unpack" several skills that are particularly useful for establishing a positive, well-defined parenting environment for children in stepfamilies. They include (a) giving good directions, (b) breaking behavior into small steps, and (c) negotiating effective discipline strategies.

Giving good directions, breaking behavior into small steps, and negotiating effective discipline strategies help establish a positive environment for children in stepfamilies.

Giving Good Directions

Providing children with clear directions regarding expectations for behavior is a major step toward preventing conflict and power struggles. By stating requests in clear, specific, neutral terms and following through with praise or contingent consequences for noncompliance, parents can effectively avoid the daily scraps that revolve around issues such as homework or chores. This can be accomplished through the following behaviors:

- Get the child's attention. Get in close and stay in contact. Before giving a direction, do something to obtain the child's full attention.
- Be pleasant, polite, and respectful, but firm (includes face, word, voice, and language).
- Make a statement by giving directions one at a time. Don't ask a question or offer a choice unless you don't expect compliance. Questions imply choice (e.g., "Pick up your shoes now, please," not, "How would you like to pick up your shoes?")
- Stay clear, short, and simple. Use the fewest possible words and make them easy to understand.
- Say what to do. A person may not know what you want unless you tell them (e.g., "Put your shoes in the closet," vs., "Don't leave your shoes in the hall.").
- Follow through. Stand and hold your position until the child begins to comply. When the child complies, *praise the behavior* pleasantly. If the child refuses to cooperate, respond with a small, contingent sanction (e.g., removing video game or television privileges for one hour). Clearly articulate that this action is due to the child's refusal to comply and follow through.
- Pay attention to timing. Give directions at reasonable times (e.g., not 5 minutes before the child's favorite TV program is finished).
- Give the child time to respond. Cooperation means getting started within 10 seconds.

Breaking Behavior Into Small Steps

Breaking instructions and expectations into small steps is another useful strategy. Some children may feel overwhelmed by a complicated or ambiguous set of instructions and be unable to cooperate. For example, a simple request — "Sebastian, please clean your room" — can result in hours of bickering. Sebastian may do one or several of the tasks that you expect to be part of room cleaning, but he may consistently miss other aspects that you take for granted. Repeatedly returning to Sebastian's room and pointing out what he has *not* completed correctly is a prescription for frustration for both parent and child. However, if Sebastian knows exactly what he is expected to do, he is more likely to do it, feel positive about the experience, and follow directions when asked again.

Strategies for accomplishing this goal can be relatively simple. Provide your child with a checklist of specific "room-cleaning" tasks. For younger children or children who have not previously performed the job, it may be helpful to walk them through the behavior for the first time. Working together helps children to understand what the task involves. It is very important to account for your child's developmental limitations when providing directions or breaking tasks into small steps. Make tasks easier for younger children and reward them for successive approximations toward the goal.

The more parents structure activities and provide children with encouragement, praise, and small rewards for a job well done, the greater the likelihood that a sense of efficacy will be instilled that increases the odds of child compliance in the future. Children develop self-confidence when their parents (a) break chores into small behaviors, (b) make tasks developmentally appropriate, and (c) pay attention and acknowledge success with awareness, praise, and small rewards.

Discipline

Disciplinary episodes make up a significant proportion of conflict in stepfamilies. As previously discussed, changes in a family's structure result in less well-defined adult responsibilities and role definitions for members. Frequently, parenting roles are ambiguous, and the extent to which stepparents are to be involved in discipline may be unclear.

Many stepparents find themselves wondering how much they should become involved or wanting their partner to handle the situation. In the MAPS program, stepparents are encouraged to work with their partners to become a cohesive parenting unit. This unity may be relatively easy to maintain during positive family moments and harder during instances of conflict. In general, stepparents in the MAPS program are advised to follow these guidelines:

1. Build a rich relationship bank account with positive attention and encouragement for good behavior.
2. Avoid being the disciplinarian. Instead, support the biological parent in his or her delivery of negative consequences.

Stepparents should avoid being the disciplinarian. They should support the biological parent in the delivery of negative consequences.

A number of strategies that are particularly useful to parents in understanding the function of discipline are discussed in the MAPS curriculum:

- *Be consistent*. Consistent parents create consistently good behavior.
- *Discipline isn't revenge*. Used properly, discipline is a teaching tool.
- *Discipline discourages behavior*. Use it to prevent problem behaviors. Use encouragement to promote positive behaviors.
- *Give 5 positives for each negative*. Balance discipline with encouragement.
- *Respond; don't react*. Decide what to do before you act.
- *Form a united parenting front*. Don't give the child a chance to drive a wedge between the two of you.
- *Pick your time*. Choose the time and place for discipline encounters.
- *Be calm, yet firm*. Breathe. Count to 10. You are the parent. Don't match your emotions with your child's emotions.
- *Use small consequences*. Little reminders used consistently are effective and fair.
- *Act right away*. Quick action helps children to connect their problem behavior with a negative consequence.
- *Be contingent*. Base consequences on children's behavior, not on your mood.
- *Don't lecture*. Lectures may make you feel better, but children don't listen to them.
- *Eliminate threats*. Threats are not effective. Not following through on threats confuses children. Threats also teach kids to push you to the limit.
- *Maintain proper distance*. Stay involved, but don't get too close.
- *Avoid arguments*. Talk makes problems worse when people are upset.
- *Evaluate and determine a stepparent's role*. This will change as relationships build.

Parents' proficiency in using new parenting skills will build over time. Some episodes and topics may be easier to master than others. There are no "superparents." We have all fallen flat on our faces at one time or another. Be patient with yourself and your family members and remember that *the most important skill of all is to be positive*.

Consistent with results from the Oregon Divorce Study, mothers and stepfathers who participated in the MAPS program displayed significantly lower levels of inept discipline than those who did not receive the intervention, both 6 and 12 months after treatment. In addition, relative to controls, MAPS parents exhibited higher levels of monitoring and positive involvement with their children at 6- and 12-month follow-up assessments, as well as greater problem-solving skills at 6 months. Both mothers and stepfathers demonstrated improvement in their parenting skills after undergoing the MAPS program (Forgatch, 2002).

It is promising that these increases in effective parenting *and* stepparenting resulted in significant reductions in observed child noncompliance, as well as higher levels of child emotional adjustment and academic success (controlling for child age and gender). These data suggest that interventions that target the five key components of parenting (effective discipline, skill encouragement, monitoring/supervision, problem-solving, and positive involvement) can and do lead to improved parenting skills and decreased child behavior problems.

Parental divorce and repartnering challenge families to navigate new and uncharted terrain. As the family system incorporates new individuals, members grapple with unfamiliar and continuously evolving roles. While this period of transition is not without its challenges, parents and partners can avoid some of the pitfalls by practicing mindful parenting and developing their parenting skills. Staying positive is at the heart of this process.

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TERRORISM: IMPROVING PSYCHOSOCIAL PREPAREDNESS FOR YOUNG CHILDREN AND FAMILIES

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At the national, state, and community levels, there is a gap in our understanding of how to mitigate the impact of terrorism on families and their children. The tendency is to give priority to addressing tangible deficiencies in preparation — for example, by stockpiling vaccines. However, little attention is paid to the fact that terrorist attacks are intended to and do produce a far greater degree of psychological than material damage. Given the range and scale of terrorist threats facing our nation, it is crucial to prepare and to provide communities with psychological tools to help increase their resilience in the current climate of uncertainty. We need to develop greater preparedness, utilizing proactive, community-level behavioral and public health strategies that will decrease feelings of helplessness and increase effective responses from families and their children in the face of panic.

This report focuses on specific issues confronting families and their children aged 0 through 4. Very young children have specific age-related reactions to traumatic events, and their reactions are influenced by the behaviors of responders and support from parents and caregivers. In developing strategies to mitigate the effects of terrorism on families and their young children, a process that invites input and expert advice from many different sources is key in preventing the psychological harm that terrorists intend to inflict. Throughout the country, the general public remains in fear of terrorist attacks and the resulting disaster. Our challenge, therefore, is to develop systematic approaches to enhance our preparedness and capacity to protect families and their young children. We must facilitate the emergence of the new attitudes, knowledge, and skills that, in turn, will enhance the resilience of our communities.

As noted, the aim of the terrorist is to induce fear and widespread panic in the general population by carrying out acts — often random and extremely violent — that take away our sense of trust and stability. These feelings occur regardless of the containment of the direct effects of the attack. Our vulnerability is stimulated by the unpredictable nature of the terrorist threat. Uncertainty about the likelihood of personal harm to oneself or one's own family exacerbates these widespread fears.

Relatively few national or international controlled empirical studies related to the long-term psychological effects of terrorism on America's communities have been done. Those strategies that are available generally do not account for symptoms existing prior to the attacks, repeat traumatization, and a variety of factors in the response system that may mitigate or, alternatively, increase the severity of the traumatic experience. Because of the wish to respond in a clinically helpful, expedient manner, intervention studies commonly are not rigorous from a scientific perspective. Clinical interventions commonly focus on crisis and short-term responses. Generally, fewer services are available over time, and thus valid long-term follow-up data are difficult to obtain.

Historically, more research has dealt with the magnitude and duration of psychological effects stemming from natural disasters, such as earthquakes or hurricanes, and terrorizing events, such as the lethal flash flood caused by strip-mining in Buffalo Creek, West Virginia. Disasters that result in extreme damage to property, severe financial problems, and a high amount of injury or loss of life have been found to be associated with lasting and pervasive psychological effects on families and children in the communities in which they occurred. In addition to a higher number of immediate and relatively short-term symptoms in the childhood victims, longer-term significant mental health symptoms have been found to persist in a smaller number of cases. Commonly, they include posttraumatic stress symptoms and new problems such as substance abuse and suicidal ideation. In a rare well-controlled, randomized study, Chemtob and his colleagues (Chemtob, Nakashima, & Hamada, 2002) found that 88% of

45

school-age children experienced posttraumatic stress disorder symptoms following the severe 1992 hurricane that struck the island of Kauai, and that group and individualized treatments were beneficial in alleviating trauma symptoms. Specific to terrorism, Pfefferbaum and her colleagues (1999a; 1999b) assessed 3,218 students seven weeks after the Oklahoma City bombing, just before the end of the school year. Immediately following the explosion, 68% feared that family members were in danger; an even larger percentage of bereaved youth (76%) had such fears. Seven weeks after the bombing 62.8% of all youth and 74% of those who lost a parent or sibling had persistent fears about safety for themselves or family members. Fifteen percent of the total sample did not feel safe "at all," and one-third of those who lost a parent or sibling experienced such feelings.

Following the September 11 attacks on the World Trade Center and the Pentagon, a number of concerns have been raised about the effects of trauma on bereaved children. Although substantive data remain sparse, McClellan (2001) discussed warning signals from a psychological perspective. Fassler (2001a; 2001b), on behalf of the American Psychiatric Association, has provided suggestions and tips to help parents provide support for their children. Goodman and colleagues (2001) at the NYU Child Study Center have produced helpful manuals for parents of preschool and school-age children and teachers to provide preparation and support related to terrorist attacks. The Federal Emergency Management Agency (FEMA) and the American Red Cross have prepared a brochure to help families and their children prepare for and respond to disasters (see www.FEMA.gov). Also useful is *Mental Health Response to Mass Violence and Terrorism: A Training Manual*, a public health–oriented publication produced by the US Department of Justice's Office for Victims of Crime and the Substance Abuse and Mental Health Services Administration's Center for Mental Health Services (Courtney et al., 2002). The manual, now in final draft form, contains a section on reactions to trauma and suggestions for intervention for children ages 1-5. "Helping Young Children and Families Cope with Trauma," a brochure developed by J. Osofsky (2001), can be found at www.future-unlimited.org. ZERO TO THREE's brochure, "Little Listeners in an Uncertain World," is available at www.zerotothree.org.

The psychosocial effects of trauma-related disasters found by numerous scholars and mental health professionals have included posttraumatic stress (PTSD) symptoms such as fear, anxiety, numbing, avoidance, sleeplessness, compulsion, and intrusive thoughts, as well as depression and increased alcohol and substance abuse. In a study of correlates of PTSD and depression among residents of New York City 5-8 weeks after September 11, investigators from the New York Academy of Medicine found substantial incidence of acute PTSD and depression. Experiences involving exposure to the terrorist attack were predictors of PTSD, and experiences involving loss as a result of the events predicted depression (Galea, Ahern, & Resnick, et al., 2002). A nationwide random survey conducted by the Rand Corporation on September 14-16 directly after the September 11 terrorist attacks showed significant short-term emotional effects (Schuster, Stein, & Jaycox, et al., 2001). Over 44% of the adults surveyed and 35% of their children reported symptoms of stress and feeling fearful for their safety as a result of the terrorist attacks. These symptoms were found in all sub-groups across the entire country, indicating high levels of fear and anxiety even among those not directly exposed to the attack.

A survey done by Mississippi State University (2002) demonstrated that significant psychological effects from the September 11 attacks were still present nearly 3 months later. One-third of respondents reported concern about someone they loved becoming a victim of terrorism; 47% worried about their community suffering a biological attack; 30% reported feelings of depression; and 35% reported being highly fearful.

In a nationwide survey conducted by the Institute for Social Research at University of Michigan (2002), the same cohort of individuals was interviewed in October 2001 and May 2002 to assess the change in the psychological effects of the attacks over the course of 7 months. The findings of the October survey demonstrated significant effects, with 66% reporting that they had trouble concentrating, 52% reporting that they often felt depressed, and 62% asserting that they had trouble sleeping. In May, 75% of respondents reported no change in their feelings of insecurity, and 11% reported being more fearful than they were 7 months earlier. Parents indicated that a high level of their emotional symptoms persisted or increased, and reported that their children were still having nightmares, were easily annoyed, and had trouble concentrating.

The Impact of Terror and Terrorism Upon Young Children and Their Families

Although only recently in our country have we experienced being victimized by international terrorism, we certainly have had considerable experience with the effects of trauma. Unfortunately, many of our children have grown up living with terror because of either family or community violence. More data are needed related to natural coping skills, true incidences of short and long-term symptoms, and scientifically validated treatment strategies and responses. However, we should not ignore the clinical data that are available and the body of knowledge that has been helpful in developing therapeutic responses for young children exposed to violence.

Certainly ZERO TO THREE has had a major commitment to understanding both the immediate and long-term consequences of exposure of young children to violence. ZERO TO THREE has played a key role in educating leaders on a community and national basis, helping them to gain an understanding that very young children are not too young to understand, integrate, or remember what has happened (Osofsky & Fenichel, 1996; 2000).

Since the events of September 11, the subsequent attack with anthrax, and the more recent sniper killings in the Washington, DC, area, leaders in various fields of mental health have emphasized the importance of taking developmental considerations into account when considering preparedness for future attacks. We know that children's reactions and symptoms related to traumatic experiences vary and are dependent on their cognitive and emotional capacities. Two- and 3-year-old children understand trauma and loss of life differently from 8- and 9-year-old children. At the same time, due to the sense of "omnipotence" that is common in young children, they may feel responsible for events that they do not fully understand but perceive as hurtful to themselves or those who are close to them. Infants and toddlers also resonate to their caregivers' reactions. When young children are severely traumatized, their symptoms are similar to posttraumatic stress disorder in adults, including re-experiencing the traumatic event, avoidance, numbing of responsiveness, and increased arousal. These young children are often afraid to be near the scene of a violent event that they have witnessed, fear going to sleep or wake up with nightmares, and show a numbing and a restricted range of affect rather than a range of emotion in their play. They commonly appear very serious — even "spacey" or disorganized at times — and smile very little (see *DC: 0-3*, "Traumatic Stress Disorder" [ZERO TO THREE, 1994]). As noted in the *DC: 0-3* description of "Mood Disorder: Prolonged Bereavement/Grief Reaction," even very young children may become sensitive to the reminder of a lost, missing, or deceased caretaker after a loss resulting from violence or terrorism. They may show acute distress when a possession that belonged to the caregiver is touched or taken away. Preschool children exposed to violence are less likely to explore and play freely, showing less motivation to master their environment (Osofsky, 1995).

Contributing to difficulties in the aftermath of September 11 is the fact that while young children depend on adults to protect them, many adults themselves experienced anxiety and a profound need to be protected. They could not be sure if they or their children would ever be safe again. Although young children need to depend on adults to keep them safe, after September 11, the important adults in their lives, the community in general, the media, and national leaders were having difficulty making sense of the world. There were many clashing values and a recognition that individuals would go to any extremes, including killing innocent members of society, to create terror. They could no longer take safety for granted. Young children and their parents were left with a mutual loss of trust, as well as many new fears, resulting in the outcomes we frequently observe in traumatized young children.

The Impact of Terrorism on Parenting

Parenting can be an especially challenging responsibility in this time of increased worries about terrorism. Clearly challenges became apparent in dealing with the September 11 attack on the world's commercial capital and our country's seat of government. Although it is perhaps possible to explain them in retrospect, the events of September 11 were not anticipated. People's ability to parent was compromised by personal loss and grief, visible reminders of the destruction, uncertainty about the future, and the possibility of future attacks. Parents who were dealing with their own acute stress symptoms, anxiety, and mood-related symptoms were still responsible for their children. Although families in the New York and DC metropolitan areas were most directly affected, anxiety and depressed mood, with accompanying difficulties in sleeping, were common throughout the country. Further, as noted previously, some symptoms related to fear and panic have appeared to increase over time. We should emphasize that most parents cope well and mobilize their strengths when adjusting to the new realities to provide support for their children. As we prepare for the future, we must understand that most parents will respond effectively and utilize their coping mechanisms well; that acute stress is expected following terrorist attacks; that some individuals experience more profound symptoms; that over time a smaller proportion will develop posttraumatic stress, anxiety, or mood disorders; and that parents' reactions and difficulties in coping can significantly affect their young children. We need to understand better when and how to intervene most effectively to help parents restore a greater sense of realistic security, address feelings of vulnerability, deal with grief and loss, and regain confidence in their parenting abilities.

Caring for Traditional and Non-Traditional First Responders

Too often mental health professionals have neglected the experience of the people who are "first responders" to disaster — emergency personnel, child care providers, other caregivers, and members of the community at large. Firefighters and police are likely to be the first on the scene after a terrorist attack. Child care and preschool workers may be responsible for taking young children

47

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to safety, providing them with a secure environment, reconnecting them with family members, and dealing with them when they return to the child care or preschool environment. Much of the impact of a terrorist attack is transmitted through the behaviors of these initial responders. They need better knowledge and attention to their own stress in order to be effective in a terrorist attack or other emergency.

How Do We Increase Our Preparedness?

National groups, universities, and professional organizations have undertaken a number of collaborative approaches. A consortium of national and international experts is emerging whose primary focus is on terrorism and efforts to increase psychosocial preparedness for children and families. Many of the members of this group have had extensive clinical and/or research experience in the areas of terrorism, traumatic exposure, early childhood development, or infant mental health (see sidebar, p. 47). At an October 2002 meeting in New Orleans, this group discussed what we know about coping mechanisms of young children and families before, during, and following traumatic events. Available data suggest that most families and young children successfully cope with terrorism and other traumatic experiences without the need for external assistance. Meeting participants emphasized the importance of respecting the range of families' coping mechanisms.

The group also discussed factors that contribute or predispose individuals to successful coping, common coping mechanisms, and what happens when coping mechanisms fail or result in unanticipated deleterious outcomes initially or over time. Factors that influence coping after a traumatic event include the nature and experience of the traumatic event, the quality of responder interventions, immediate and longer-term supports, and various inner psychic events. Some pointed out that while repeat traumatization places people at a higher risk for difficulties, those who have successfully managed one

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traumatic event are more likely to cope successfully with subsequent events. Throughout the discussion, many in the group stressed the importance of focusing on the current base of scientific knowledge; reviewing sound, evidence-based data; and acknowledging current gaps in the research to plan further evidence-based studies to help with psychosocial preparation for and responses to terrorist attacks.

The group focused on a number of themes that have considerable relevance for young children and families, and developed this list of recommendations:

- The description of young children's and families' coping responses and mechanisms of coping should be based on the best scientific evidence available.
- Responders' immediate and long-term efforts to help young children and families cope should be based on the best scientific evidence available.
- Child care, preschool, and classroom teachers, churches, physicians, and others should be recognized as "first responders" and provided with appropriate training and support.
- We should consider model-building which includes an understanding of recent approaches, including those being developed by the FEMA, The Red Cross, the Department of Justice (DOJ), the Substance Abuse and Mental Health Services Administration (SAMHSA), the recently initiated Terrorism and Disaster Branch of the National Child Traumatic Stress Network (NCTSN), and the Department of Homeland Security (DHS).
- We should consider methods to promote a) integration of the efforts of responding agencies and organizations, b) systems that allow data to be shared and integrated across entities on a city-, state-, and nation-wide basis, and c) resource development to allow for rapid deployment of experts and expertise where response is needed.
- We must determine how to integrate the "hardware" of medically and biologically driven information and the more traditional public health responses to emergencies with psychosocial "software" that promotes or enhances team efficiency, function, communication, and management of intense emotion.
- We should review funding resources that are currently available for research and program development and consider additional local, state, national, and international resources — including foundation support — for increasing psychosocial preparedness of children and families.

PHOTO: ROBERT R. FENICHEL

Plans for collaborative research are emerging from this group. Funds have already been obtained to further studies in Israel related to the development of stress symptoms following terrorist attacks and the methods that are most helpful in dealing with these symptoms. Another study will compare baseline symptoms of children in Israel, where terrorism is a fact of life, to children (including young children) and families in inner-city areas of the United States where exposure to community and family violence is common. A fuller understanding of similarities and differences in baseline symptoms should increase our understanding of the impact of the various types of trauma that these children and families have experienced, and can be expected to experience, over time. Community, regional, and national approaches to address particular needs of responders and their families are being considered, as well as what services can best provide early and long-term interventions.

Other important developments are currently under way in this area:

- Under the leadership of Dr. Robert Abramovitz of the Jewish Board of Family and Children's Services, Dr. Claude Chemtob of Mt. Sinai Medical School, and consulting experts in infant mental health, New York's Jewish Board of Family and Children's Services has initiated studies in services for young children and families in New York. Their work will include screening for ongoing distress related to September 11, and relationship-based dyadic interventions when needed.
- Building on her work with preschool children exposed to violence, Dr. Oriana Linares of New York University's Child Studies Center is leading a comparison of internalizing and externalizing problems of young children before and after September 11. Her research focuses on resiliency, with particular emphasis on social supports and emotional regulation.
- Dr. Betty Pfefferbaum of the University of Oklahoma and Dr. Claude Chemtob have been chosen to lead the Terrorism and Disaster branch of the NCTSN. Utilizing collaborators from around the country, the Terrorism and Disaster branch will provide special attention to the needs of young children and families and formulate strategies for developing and implementing training, response, and service modules.
- In addition to traditional public health preparation and management strategies, FEMA has provided a $132,000,000 Regular Services Crisis Counseling Grant for Project Liberty to help with the aftermath of the attack on the World Trade Center. FEMA has also provided a grant to the Sesame Workshop to develop materials for children who continue to struggle with mental health issues.
- The New York City Metropolitan Area Trauma Initiative will review the New York City experience post-September 11. Successes and difficulties that arose in coordination and provision of services will be evaluated to help in recommending future approaches.

In Conclusion

We all recognize that the threat of terrorism has increased concern about physical and psychological safety not only in our country, but also throughout the world. In our efforts to achieve greater preparedness, we must focus on the specific psychosocial needs of young children and families. Without special emphasis, the needs of young children are likely to be ignored. We need to develop models and programs that take both coping strengths and the need for additional services into account. While drawing on our knowledge of services that, based on clinical experience, are helpful, we must also recognize the need for careful, methodologically sound research to extend our knowledge and enhance the quality of prevention and intervention programs. As we move ahead, we can hope that our efforts will not only increase our preparedness in the face of terrorism but will also help young children and families who are exposed to the threats — and realities — of family violence, community violence, and natural and man-made environmental disasters.

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The First Three Years & Beyond: Brain Development and Social Policy

(2003) Edward F. Zigler, Matia Finn-Stevenson, & Nancy W. Hall (Yale University Press, P.O. Box 209040, New Haven, CT 06520-9040, www.yale.edu/yup) $24.95. Hardcover.

Dedicated to ZERO TO THREE Board member Marilyn Segal, this volume by ZERO TO THREE Life Board member Edward Zigler, ZERO TO THREE Graduate Fellow Nancy Hall, and Yale University research scientist Matia Finn-Stevenson offers a framework for integrating findings from neurological research into genetic, clinical, observational and behavioral studies of the child and family. The authors argue that brain research has so far confirmed the conclusions of decades of social science research — that is, that the young child's experience of the world has a profound impact on early and continuing development. Parents and other warm, respectful caregivers, they suggest, provide infants and young children with the necessary elements for healthy cognitive, social, and physical development. Successful intervention programs, according to the authors, must be comprehensive, of high quality, and of sufficient duration and intensity to accomplish their goals; given the weakness of categorical programs, individual policies and programs should be nested within a cohesive policy framework. Analyzing coverage of "the new brain research" in the popular media during the past several years, the authors acknowledge that overblown, simplistic reporting "accomplished several things that more cautious reporting might not have done" — for example, attracting mainstream media to child development issues, convincing program developers of the importance of the early years, and placing pressure on legislators and other policy developers.

HELLO BENNY: What It's Like To Be a Baby (Growing Up Stories)

(2002) Robie H. Harris, illustrated by Michael Emberly (Margaret K. McElderry Books, Simon & Schuster Children's Publishing Division, 1230 Avenue of the Americas, New York, NY 10020, www.SimonSaysKids.com). $16.95. Hardcover.

"Every child and grown-up was a baby. And babies and children become part of a family in different ways. Most babies are born into their family. Some babies and children are adopted into their family. There are many, many different kinds of families." So begins Hello Benny, the first in a series of "growing up stories" that will include books by Harris and Emberly on what it is like, for different children and their families, to be 1, 2, 3, and 4 years old. Designed for children from preschool through early elementary grades, the books are based on stories that Harris, a former master teacher at Bank Street College, told her own children and other relatives in response to their questions about the early years of their lives. The illustrated narrative of Benny's first year is accompanied by facts about early development likely to appeal to young readers — for example, "All around the world, most babies about a year old say words that sound like 'Dada' and 'Mama' no matter what language their families speak." Among the experts Harris consulted to ensure the accuracy of her information are ZERO TO THREE Board members Alicia Lieberman, Jeree Pawl, and Barry Zuckerman; graduate Fellows Sarah Birss and Linda Mayes; and *Zero to Three* contributors Bill Harris, Margot Kaplan-Sanoff, and Edward Z. Tronick.

Infant and Toddler Mental Health: Models of Clinical Intervention With Infants and Their Families

(2002) J. Martín Maldonado-Durán, MD, Ed. (American Psychiatric Publishing, Inc., 1400 K Street, NW, Washington, DC 20005, www.appi.org) $44.95. Paperback.

Edited by ZERO TO THREE graduate Fellow J. Martín Maldonado-Durán and written by clinicians working with infants and toddlers and their families, this collection presents treatment strategies and methods for assessing babies and toddlers with behavioral or emotional difficulties and their families. The book does not prescribe a particular model for infant mental health practice, but rather illustrates clinical work with families from diverse cultures, countries, and circumstances.

The book is divided into 4 sections, the first of which presents a theoretical background for understanding trauma, infant-caregiver attachment, and culturally transmitted beliefs about babies' inner experience. In the second section, clinicians discuss their work with families and infants — sometimes with those not yet born, as in the chapter by JoAnne Solchany, Kristen Sligar, and Kathryn Barnard on a program designed to promote maternal attachment during pregnancy. Alicia Lieberman writes about "unreachable" families; Teresa Lartigue describes infants who reflect a family's multiple stresses; the late Serge Lebovici writes on the use of the therapist's body in parent–infant psychotherapy; Alice Eberhart-Wright discusses working with families in Early Head Start; and Hisako Watanabe discusses trauma passed down from mother to mother through generations. The third section focuses on three frequent areas of disturbance:

eating, sleeping, and crying. In the fourth section, contributors discuss the outcomes of two particularly difficult cases.

Stepparenting: Creating and Recreating Families in America Today

(2001) Stanley H. Cath & Moisy Shopper, Eds. (The Analytic Press, Inc., 101 West Street, Hillsdale, New Jersey 07642, www.analyticpress.com) $52.50. Hardcover.

Finding that most publications on divorce focused primarily on the effects on children, Cath and Shopper first conceived this volume as a collection that would focus solely on the role of stepfathers in newly formed families. As they drew their materials together, however, the book began to address the issues divorce raises for all adults involved: mothers, fathers, stepfathers, and stepmothers. The resulting collection spans the clinical, sociological, developmental, and legal aspects of trying to maintain or form bonds with children, stepchildren, ex-spouses, and new spouses when one must play a new and different role in both families. With contributions from faculty and associates of major medical and psychoanalytic institutions, *Stepparenting* covers a range of topics, from sharing the fathering role with another ("The Challenge of Maintaining the Fathering Role After Divorce: Overcoming Shame," by Eugenio M. Rothe) to parenting without a spouse ("Between Marriages: A Period of Dread"). The book is not prescriptive — Cath and Shopper state they are wary of the usefulness of "generalized advice" — but rather seeks to reveal divorce's diverse and demanding effects on parents, stepparents, and their families.

Out of Wedlock: Causes and Consequences of Nonmarital Fertility

(2002) Lawrence L. Wu and Barbara Wolfe, Eds. (Russell Sage Foundation, 112 East 64th Street, New York, NY 10021) $39.95. Hardcover.

The chapters in this volume are drawn from a conference of demographers, economists, and sociologists held in April 1999 at the Institute for Research on Poverty (IRP) at the University of Wisconsin-Madison. The aim of the conference — and this volume — was to provide objective information and analysis of basic research relevant to public and policy discussions of nonmarital fertility. The editors observe that nonmarital fertility lies at the intersection of several processes by which families are formed — childbearing, marriage, and, increasingly, cohabiting unions. In the US, nearly all of the increase in the percentage of children born outside of marriage between 1988 and 1995 was due to increases in births to cohabiting couples. Since more than 40% of nonmarital births now occur within a cohabiting union, the marriage-sole parent dichotomy is no longer adequate for either theory or empirical analysis. Moreover, the presence or absence of a marital or cohabiting union is only a crude proxy for the commitment of the adults to one another and to the child, commitments that may vary over time. General observations concerning the causes and effects of nonmarital fertility in the US include, among others: 1) Nonmarital childbearing reduces subsequent union formation, and much of this association seems to be causal; 2) a nonmarital birth is associated with negative outcomes for children, but it is not yet clear how much of this relationship is causal; 3) the role of fathers following a nonmarital birth varies; and 4) the generosity of welfare programs does appear to affect rates of nonmarital childbearing, especially of women in their twenties.

Complex Adoption & Assisted Reproductive Technology: A Developmental Approach to Clinical Practice

(2001) Vivian B. Shapiro, Janet R. Shapiro, & Isabel H. Paret (The Guilford Press, 72 Spring Street, New York, NY 10012, www.guilford.com) $42.00. Hardcover.

To address the growing number of couples and single adults who have chosen to adopt or use assisted reproductive technology (ART) to become parents, this series of essays draws on the authors' own clinical work with children and families to explore how clinicians can address the multiple new "pathways to family formation." Taking readers from family narratives to research and practice, the three authors discuss how these new practices and technologies have affected parenthood and families and suggest ways for clinicians to understand and address these changes from a developmental perspective.

The book's first section provides a conceptual framework for practice drawn from the authors' experience, and a brief overview of the clinical and developmental issues that arise in adoption. Part II, Complex Adoption, discusses adoptions following foster placement, kinship care (grandparents caring for grandchildren), international adoptions, and the impact of open adoptions on family formation. The ART section discusses such issues as the new technology's impact on identity formation in children and how it affects single, gay, and lesbian parents. The final chapters, which explore implications for practice, training, and research, discuss families' internal struggles with secrets and lies about adoption and the use of ART, and the role clinicians can play in diverting and diffusing such crises before they arise.

Child Rearing in America: Challenges Facing Parents With Young Children

(2002) Neal Halfon, Kathryn Tauffe McLearn, and Mark A. Schuster, Eds. (Cambridge University Press, 40 West 20th Street, New York, NY 10011, www.cambridge.org) $65. Paperback.

In this volume, the editors bring together experts from the disciplines of economics, sociology, psychology, and medicine to discuss children's well-being from the perspective of culture, economic circumstances, early experiences, and physical health. The starting point for all contributors is data from a national telephone survey of over 2,000 families with infants and toddlers, sponsored by the Commonwealth Fund. Section I, Conditions of Families with Young Children, explores the conditions families with children from 0-3 live under today; it includes an approach to measuring the allocation of four kinds of "resources" — psychological, time, financial, and human capital — to individual children. Section II, Child Rearing Practices, examines parenting behaviors that may influence a child's development, including employment and shared caregiving, the use of routines, book-reading, discipline, breastfeeding, and behaviors related to maternal depression. Section III, Delivery of Health Services, discusses the impact of access to and quality of health care on children and families, examining prenatal and perinatal services, young children's access to health care, and the parent–physician relationship. In Section IV, Future Directions and Policy Implications, Halfon and McLearn discuss how policy makers can translate child development research into practice, policy, and positive outcomes for very young children.

You and Your Baby: A Special Relationship
You and Your Baby: Playing and Learning Together

(2001) Eleanor Anasar (The Corner Health Center, 47 N. Huron Street, Ypsilanti, MI 48197, www.cornerhealth.org) $2.65 each. Paperback.

Unable to find appropriate parenting literature for low-literacy parents, Ypsilanti's The Corner Health Center — which provides medical care, health education, and support services for young men and women ages 12-21 and their children — published these guides for parents of young children in both English and Spanish. Written at a third-grade level, the handbooks are illustrated with photos from the Center's multicultural clientele (the Spanish editions use photographs of Latino families) and use everyday examples to discuss larger topics such as discipline and play.

A Special Relationship focuses on the balance a parent must maintain between setting limits and providing appropriate care. The guide addresses common parental concerns such as excessive crying, typical curiosity, and hitting and biting, and suggests using a daily routine and modeling good behaviors as alternatives to harsh discipline. *Playing and Learning Together* picks up where *A Special Relationship* leaves off, explaining how play can contribute to a baby's healthy development, suggesting ways to include constructive play into a baby's daily routine, and detailing what to look for and encourage while playing with a baby. The guide includes exercises that develop a baby's five senses, and explains how babies can learn while playing independently and with others.

The Blank Slate: The Modern Denial of Human Nature

(2002) Steven Pinker (Viking, Penguin Putman Inc., 375 Hudson Street, New York, NY, 10014, www.penguinputman.com) $27.95. Hardcover.

Pinker, a linguist and professor of psychology at the Massachusetts Institute of Technology, argues that science has tended to dismiss the influence of genetics on human nature because of a backlash against "incendiary" works like *The Bell Curve* and *A Natural History of Rape* (which argue, respectively, that the gap between black and white Americans' I.Q. scores and the persistence of rape in our culture have hereditary, not societal, causes). Although Pinker by no means endorses these views, he contends that science's bias toward a "blank slate" view of the effect of heredity on different children in the same family has led us to shape our families and communities in ways that are less than ideal.

Pinker presents empirical evidence that traits that can be inherited include dependence on nicotine or alcohol; number of hours of television watched; and openness to experience. Traits that cannot be inherited include political party allegiance, languages spoken, and religious observance. He cites psychologist Eric Turkheimer's 3 laws: 1) All human traits are heritable; 2) The effect of being raised in the same family is smaller than the effect of genes; and 3) A substantial portion of the variation in complex human behavioral traits is not accounted for by the effects of genes or families. Science's continuing "denial" of this evidence, Pinker argues, leads to misunderstanding about the function of genes and the role of the environment in human development.

Also of Interest:

***Public & Private Families: A Reader, Second Edition** (2001), by Andrew J. Cherlin (McGraw-Hill Higher Education, 1221 Avenue of the Americas, New York, NY 10020, http://books.mcgraw-hill.com) $77.50.* The author, a professor of sociology at Johns Hopkins University and an investigator of the effects of family structure on children, has collected 32 readings. Some describe how people manage their personal relationships; others address public issues raised by recent changes in family life.

***Father Hunger: Explorations With Adults and Children** (2001), by James Herzog (The Analytic Press, Inc., Publishers, 101 West Street, Hillsdale, NJ 07642, www.analyticpress.com) $49.95.* The author presents data from analytic theory and practice, developmental research, and observational study to identify the psychological elements of successful fathering and describe the emotional consequences of father absence.

The Secure Child: Helping Children Feel Safe and Confident in a Changing World *(2002) by Stanley I. Greenspan, MD (Perseus Publishing, 11 Cambridge Center, Cambridge, MA 02142, www.perseuspublishing.com)* $20.00. ZERO TO THREE Past President Stanley I. Greenspan discusses how, from a developmental perspective, parents can insure that their children feel secure, safe, and confident in the face of difficult, dangerous, or traumatic situations or events.

The Marriage Problem: How Our Culture Has Weakened Families *(2002) by James Q. Wilson (HarperCollins, 1350 Avenue of the Americas, New York, NY 10019, www.harpercollins.com)* $25.95. The author argues that marriage is under attack, claiming that children raised by married couples will fare better economically and emotionally than those raised by a single parent or divorced parents.

Why There Are No Good Men Left: The Romantic Plight of the New Single Woman *(2002), by Barbara Dafoe Whitehead (Broadway Books, Random House, Inc., 1540 Broadway, New York, NY 10036, www.broadwaybooks.com)* $22.95. The author, co-director of the National Marriage Project at Rutgers University, points out that while a "broad-based overhaul of girl-rearing practices" has prepared women to be self-sufficient, independent, and sexually liberated, the once-effective social infrastructure designed to help young women meet marriageable men no longer exists.

Mandela's Children *(2001), by Oscar A. Barbarin & Linda M. Richter (Routledge, 29 West 35th Street, New York, NY 10001, www.routledge.com)* $23.95. This book discusses the effects of poverty, racism, violence, and social inequality on black children in post-apartheid South Africa.

Invisible Punishment: The Collateral Consequences of Mass Imprisonment *(2002), edited by Marc Mauer and Meda Chesney-Lind (The New Press, 450 West 41st Street, New York, NY 10036, www.thenewpress.com)* $26.95. Leading scholars and advocates discuss 30 years of scholarship on the effects mass imprisonment and "get tough" social policies on the families and communities of those put in jail.

On-line Resources

Council on Contemporary Families

www.contemporaryfamilies.org

Founded in 1996, the Council on Contemporary Families was developed to serve as a discussion center for how the CCF's membership — family researchers, mental health and social work practitioners, and clinicians — could best determine what contemporary families need and serve those needs. A quiz containing "some of the most interesting, important, and little-known facts about families" (Do impoverished single mothers want to get married? Is child care is good for children?) tests visitors on their knowledge of the latest research, while "Marriage, Poverty, and Public Policy," a posted paper whose co-author, Stephanie Coontz, is director of the CCF, argues that parents' remaining unmarried may be a symptom, not the cause, of long-term poverty. Changing Trends is a comprehensive list of links to recent pieces in mainstream magazines with articles on such topics as gay couples and adoption, divorce statistics, and the murder of children. The Articles section links to members' work from *USA Today*, *Salon*, *Life*, and others on issues such as blended families, quality child care, and myths about families, while Current Controversies posts papers by researchers, academics, and professionals, followed by posted letters from colleagues. Fact Sheets presents data on a range of topics; "How We Live and How We Used to Live" compares statistics on families' lives in 1970 to those in 1998; and a Links area points readers to numerous relevant data, research sources, and organizations.

Child Trends

www.childtrends.org

Child Trends' Web site and its sister site, www.childtrendsdatabank.org, contain reports, fact sheets, briefs, and data on early childhood–related subjects such as child abuse, neglect, and family violence; children's health; early childhood; education; family strengths; fatherhood; indicators and statistical profiles; marriage/family; public policy; urban issues; and welfare and poverty. Recent reports include *Children in Poverty: Trends, Consequences, and Policy Options*, which examines family structure, the US poverty rate, and social, cognitive, and economic outcomes for children, and *Family Strengths: Often Overlooked, but Real*, which discusses "what's right" about families that have otherwise been characterized as troubled.

Current Early Childhood initiatives are detailed in the Projects section of the site, and include designing the evaluation plan for South Carolina's statewide school readiness initiative, First Steps, and working with the Minnesota Child Care Policy Research Partnership to examine the use of tiered reimbursement as a strategy for

improving child care quality among low-income families. Publications offers a lengthy list of longer reports in the previously listed subject areas that are available for purchase (research briefs are available for free download), while an annual newsletter, *Facts at a Glance*, contains information on teen pregnancy and is also available for download. The Newsroom links visitors to recent articles in other publications, and the Child Trends Databank provides indicators for numerous categories, including school readiness, access to health care, and early development.

Training Opportunities

Beginning in June 2003, **Erikson Institute**, a graduate school in the field of Child Development, is launching an online version of its 18-credit-hour **Irving B. Harris Infant Studies Graduate Certificate Program**. Students may specialize in either Prevention/Early Intervention or Child Care. Core courses include infant/toddler development, family studies, assessment, and methods. Internships are tailored to individuals' interests. Innovative online strategies (offered through WebCT) allow students the flexibility of participating in graduate courses from their own locations and on their own time schedule. Course formats are designed to foster interactive student involvement.

Individual courses may also be taken for professional development credit. For information and an application, contact www.erikson.edu or info@erikson.edu. Erikson Institute is located at 420 N. Wabash Avenue, Chicago, IL 60611; the telephone number is (312) 755-2250.

Boston's **Early Childhood Mental Health Collaborative** will begin training non-traditional mental health providers in the early identification and referral of families with children from birth to age 5 who are at risk of or who have mental health problems. The **Center for Young Children and Families** of the **Boston Institute for Psychotherapy** will lead the partnership of community-based Boston agencies making up the Collaborative. This 3-year effort is being supported by the Blue Cross Blue Shield of Massachusetts Foundation (www.bcbsmafoundation.org) in partnership with an anonymous private funder. Co-directors of the Boston Institute for Psychotherapy's post-graduate training program on Infant Mental Health are Ann Epstein, MD, and **Sarah Birss, MD**, a graduate ZERO TO THREE Fellow. For more information, see www.bostoninstitute.org.

Videotapes

Building a Family Partnership

Produced by Jana Staton, Ph.D., American Association for Marriage and Family Therapy Foundation. Available from Child Development Media, Inc., 5632 Van Nuys Blvd., Suite 286, Van Nuys, CA 91401. Tel. 800-405-8942. Fax 818-994-0153. 50 min. Purchase $85, this title. Viewers Guide included. $800 for the 16-tape series.

From the series, ***Listening to Families*** videotapes, this tape includes unedited excerpts from conversations between experienced family consultants and families from African American, Hispanic/Latino and European American backgrounds from all income levels.

Segments were selected to highlight generic communication strategies helpful in joining with a family and building a collaborative partnership. Strategies include: having a conversation rather than an interview, sharing power by letting the family do the talking, focusing on family members' strengths, asking open-ended questions and encouraging expression of different viewpoints.

Exploring Family Strengths

Produced by Jana Staton, Ph.D., American Association for Marriage and Family Therapy Foundation. Available from Child Development Media, Inc., 5632 Van Nuys Blvd., Suite 286, Van Nuys, CA 91401 Tel. 800-405-8942. Fax 818-994-0153. 30 min. Purchase $85, this title. Viewers Guide included. $800 for the 16-tape series.

Also from the ***Listening to Families*** series, this video presents the rationale for strength-based intervention. It includes examples and strategies for engaging families in conversations about their strengths as well as their problems. The video illustrates how direct service providers can explore and elicit strengths with families from diverse economic and cultural backgrounds even under difficult and stressful circumstances.

Family Transitions: Young Children Speak Their Minds About Divorce

Produced by Michael Trout, Director, the Infant-Parent Institute, Champaign, IL. Available from Child Development Media, Inc., 5632 Van Nuys Blvd., Suite 286,

Van Nuys, CA 91401. Tel. 800-405-8942. Fax 818-994-0153. Website: www.ChildDevelopmentMedia.com. 16 min. $70 plus shipping and handling.

When a young child experiences the divorce of its parents, the child's voice is often lost. Sometimes it is lost because the grownups are temporarily unable to hear, overwhelmed as they are at the moment with their own sorrow or rage or disorientation. Legal disputes can further silence a child when the child is asked questions impossible to answer. This video is an effort to collect in one place the many things young children say—in their drawings, in their behavior and sometimes even in their words—when their families are coming apart. It is designed for mediators, judges, support programs for divorcing couples, and for parents themselves as they examine the feelings of young children of divorce. The Infant-Parent Institute is a private teaching and clinical service institute specializing in problems of attachment in infants and adults.

The Sally Provence Award for Excellence

UCLA's Infant Development Program Wins the Sally Provence Award for Excellence

At the 2002 National Training Institute in Washington, D.C., ZERO TO THREE President Samuel Meisels presented the **Sally Provence Award for Excellence to the Megan E. Daly Infant Development Program**, a campus-based, self-supporting infant/toddler child care center that is part of the Department of Psychology at the University of California at Los Angeles. The award, named for the late Sally Provence, MD, ZERO TO THREE founder and Past President, recognizes, in alternate years, individuals and service programs that demonstrate four qualities that Dr. Provence considered crucial to effective programs and individuals working with infants and families. These are: an abiding curiosity about the meaning of behavior of very young children and their families; a strong conceptual framework for understanding developmental issues and problems in the children and parents it serves; continuity and individualization of respectful, trustworthy care; and training and ongoing support for all practitioners in the field.

In addition to these four qualities, the Megan E. Daly Infant Development Program (IDP) is distinguished by the profound interconnectedness of its academic and child care programs; its commitment to close relationships between caregivers, parents, and families; and its notable efforts of outreach into the greater community.

The IDP serves children between the ages of 3 months and 3 years whose parents are UCLA faculty, staff, and students. The Center is linked to the University's undergraduate population through an innovative academic program in Applied Developmental Psychology. IDP has trained hundreds of students in early child care and development, many of whom have gone on to careers in academic, program, and policy environments. The Center serves 12-14 families at any given time and has a waiting list of approximately 90 families. Director **Cathy Tsao** recently received funding to build a second child care facility, which will allow IDP to serve the needs of many more families and train twice as many students per year.

Although IDP's work with children is guided by no single theoretical framework (parents work with caregivers to identify a child's needs), the program's approach is informed by attachment theory — which, in the context of child care, means, according to Tsao, "stable, supportive, loving, sensitive relationships for infants, toddlers, and their families." IDP is also guided by J. Ronald Lally's principles of welcoming families as well as children in child care and emphasizing "intimate involvement" with each child.

Relationships with parents are central to IDP's mission. In addition to providing parents with daily journals on the progress of their children, IDP staff use email, pictures, faxes, and video to keep parents in contact with and informed about their children. IDP teachers hold frequent workshops for parents on infant development. Parents serve on an advisory committee that oversees the implementation of all new projects, expenditures, and new methods for working with the Center's children. When a former Center parent died, the staff and parents in the IDP community banded together to provide round-the-clock care for the family; staff offered all parents information about grieving and young children.

Recently, IDP has formed alliances with the infant/toddler community at large and with local and community infant/toddler caregivers. Teachers regularly present at CAEYC and NAEYC conferences, and the Center offers ongoing training (with continuing education units) and assessment for local programs and caregivers free of charge.

Upcoming Issues

March 2003 – Community Partnerships for Quality Infant/Toddler Care: With support from the Child Care Bureau and the Ewing Marion Kaufmann Foundation, ZERO TO THREE and Mathematica Policy Research have studied strategies for developing community systems to help families find infant/toddler care, blend funding sources to pay for care, and support providers to improve quality and develop professionally. This issue will feature case studies of community partnerships in Colorado Springs, CO; Kansas City, KS; Sedalia, MO; and Buncombe County, NC, as well as lessons learned across sites and parent perspectives.

May 2003 – Caregiver Goals and Societal Expectations: Guest editors for this issue are representatives of the infancy programs housed in each member institution of the Four-College Early Childhood Consortium: Virginia Casper, Bank Street College of Education; Fran Stott, Erikson Institute; Renatta Cooper, Pacific Oaks; and Cathy Finn, Wheelock College. Articles in this issue will describe how different families and caregivers negotiate competing cultural models of child rearing, especially when familial goals do not match an early childhood program's or mainstream society's expectations.

July 2003 – Evaluating Programs That Serve Infants and Families: Graduates of the ZERO TO THREE Leadership Development Initiative Class of 2001-2 address the theoretical, methodological, logistical, and political challenges of evaluating infant/family programs. Co-guest-editors Virginia Buysse and Lisa Boyce and their colleagues represent the worlds of child care, early intervention, infant mental health, and comprehensive, publicly funded initiatives. They will analyze, among other issues, new emphases on accountability and evidence-based practice, using multiple case examples to illustrate their discussion.

The Editorial Mission of the *ZERO TO THREE* Bulletin

To provide a forum for thoughtful discussion of important research, practice, professional development, and policy issues in the multidisciplinary infant, toddler, and family field.

The Mission of ZERO TO THREE: National Center for Infants, Toddlers, and Families

ZERO TO THREE is a national nonprofit whose mission is to promote the healthy social, emotional, and intellectual development of our nation's infants and toddlers by supporting and strengthening families, communities, and those who work on their behalf.

www.zerotothree.org

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